DOCUMENT RESUME

ED 068 626 VT 016 456

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TITLE	Child Day Care in Indiana. Manpower and Training Requirements.
INSTITUTION	Indiana State Dept. of Public Welfare, Indianapolis.; Purdue Univ., Lafayette, Ind.
REPORT NO	Manpower-R-72-3
PUB DATE	31 Jul 72
NOTE	77p.
AVAILABLE FROM	Purdue University, SCC-A, Lafayette, Indiana 47907 ($2.00)
EDRS PRICE	MF-$0.65 HC-$3.29
DESCRIPTORS	*Career Ladders; *Certification; *Child Care Workers; Day Care Services; *Educational Needs; Educational Programs; Job Training; Manpower Development; *Manpower Needs; Manpower Utilization

ABSTRACT

A survey of the operators of 969 licensed and 431 unlicensed child care facilities in Indiana was conducted to: (1) help standardize and facilitate the utilization of occupational titles, duties, responsibilities, and qualifications of four levels of child care specialists (CCS) arranged into a career ladder, and (2) provide educational, government, and civic planners with information to assist them in planning educational programs, certification requirements, and policies regarding child care programs and services. Data from 111 respondents revealed that: (1) the four levels of CCS are represented in the child care centers, with over half of the workers falling into the first level of the career ladder (worker/assistant); (2) CCS at all four levels are needed, but the demands are greater at the first two levels (worker/assistant and associate degree); (3) salaries paid to all CCS levels are low and below average salaries received by recent Purdue University graduates; and (4) two types of programs/program assistance were needed, including preservice and inservice training assistance for the worker/assistant level and college level courses in child development and supporting fields. Other findings and recommendations are included, and survey materials are appended. (SB)

ED 068626

U.S. DEPARTMENT OF HEALTH
EDUCATION & WELFARE
OFFICE OF EDUCATION

CHILD DAY CARE IN INDIANA

Manpower and Training Requirements

MANPOWER REPORT 72–3

31 JULY 1972

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FOREWORD

CHILD DAY CARE IN INDIANA

The number of women in the labor force -- including those with children under age six - keeps growing each year. Adequate day care for these children is an emerging problem in most communities. It is the responsibility of public supported educational institutions to help identify and meet defined societal needs; therefore this study addresses itself to the classification, duties & functions, qualifications, training & education, certification, and the need for child-care specialists.

This report presents data from the literature and a survey of nearly 1,500 child-care centers and homes, nurseries, 4-C, Head Start, and other special preschool activities in Indiana. The report:

(1) Explains the child-care specialist career ladder from the Child-Care Specialist (CCS) I (apprentice/worker, non-degree), thru CCS IV, a specialist having an appropriate graduate-level degree.

(2) Presents data from more than 100 survey respondents concerning their current and projected manpower situations including present employees, job vacancies and future requirements at each CCS level. (Data are shown for the State and for six internal geographic regions.)

(3) Illustrates the levels of training programs needed and possible numbers of participants.

(4) Describes a proposed child-care associate degree program and the reaction of survey respondents to its establishment and the need for graduates as well as their possible beginning salaries.

(5) Portrays the opinions of those surveyed concerning the need for certification or registration of child-care specialists at each level and the various methods recommended to do so.

(6) Selected materials and data for the Nation and this State, gathered from pertinent literature, are also reported.

(7) Finally, discussion, conclusions and recommendations based on the above are presented in the final chapter.

It is hoped that this report will be of some assistance to those who are concerned with and are responsible for actions in this area of growing importance.

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ACKNOWLEDGEMENTS

This study was assisted through the material support provided by the Indiana State Department of Public Welfare and Purdue University. It was conducted under the guidance and participation of members of an advisory committee - who gave freely of their talents and time.

Appreciation is therefore gratefully expressed to

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TABLE OF CONTENTS

Foreword and Acknowledgements

Section		Page
	CHAPTER I	
	PURPOSES AND DESCRIPTION OF THIS REPORT	
1.	The Problem	1
2.	Purposes of This Study and Report	2
3.	Rationale and Methods Applied	2
4.	Contents and Format of Report	2
	A Good Day Care Program Quotation	3
	CHAPTER II	
	SURVEY DESCRIPTION	
5.	The Survey Package	4
	Letter of Transmittal	
	Explanation of the Survey	
	The Questionnaire	
	Attachments: (1) Child Care Specialist Career Ladder	
	(2) Objectives and Guidelines for Associate Degree in Child Care	
6.	Survey Mail-out and Response	5
	Table 1 Distribution of Questionnaire Returns	5
	Table 2 Questionnaire Returns by Type Activity	6
	Figure 1 Purdue University Extension Administration Regions	7
	CHAPTER III	
	ANALYSIS OF QUESTIONNAIRE RETURNS	
7.	Manpower and Salary Matters (Part I of Questionnaire)	8
	Table 3 Manpower: State-wide	8
	Table 3A Manpower: By University Extension Regions	9
	Table 4 Salary Information	10
	Manpower Related Comments	11
8.	Needed Training Programs (Part II of Questionnaire)	12
	Table 5 Needed Training Programs: State-wide	12
	Table 5A Needed Training Programs: By Extension Region	12
	Training Program Related Comments	13

9. Proposed Associate Degree Program for Child Care Specialists (Part III of Questionnaire) 14

Table 6 Agreement to Begin Associate Degree Program for Child-Care Specialists 14

Associate Degree Related Comments 15

10. Certification or Registration of Child Care Specialists (Part IV of Questionnaire) 16

Table 7 Certification or Registration 16

Certification or Registration Related Comments 17

11. Other Comments or Suggestions 18

CHAPTER IV

NATIONAL AND GENERAL STATE INFORMATION CONCERNING CHILD CARE

12. The Changing Nature of Day Care 20

13. "Quality" Child-Care 23

14. Day Care Provided by Industry 24

15. The Child Development Associate: A New Child Care Profession 26

16. Child-Care Arrangements of Working Mothers 28

17. A Governor's View of Welfare and Child-Care 28

18. National Day Care Staff Requirements (With Derived State Needs) 29

19. State and Regional Licensed Day Care Homes and Centers 30

Table 8 Licensed/Approved Day Care Centers and Homes 30

(Comparisons of Selected Mid-West States)

20. Past and Present Practices -- and Planning for the 1970's 31

* * *

Special Report of Survey of Working Mothers (Tippecanoe County, Indiana, 4-C Program) 32

CHAPTER V

DISCUSSION, FINDINGS AND RECOMMENDATIONS
(Printed on Canary Yellow Paper)

21. Discussion and Findings 33

(1) The Committee 33

(2) Survey Response 33

(3) Manpower; Current Situation 34

(4) Manpower; Annual Recurring Requirements 35

(5) National Day Care Requirements and Derived State Needs 35

CHAPTER V (Continued)

(6) Salaries 36

(7) Needed Training Programs 37

(8) Certification and Registration 38

(9) Other Comments and Suggestions 39

22. Recommendations 40

(1) A Note of Caution 40

(2) Further Study Needed of Day Care Homes 40

(3) Child-Care Specialist I: Training and Financial Assistance 41

(4) Child-Care Specialists II and Higher: Education, Recognition and Placement 41

(5) Salaries and Costs 43

(6) Certification and Registration 43

Special Note: Child Development Associate 44

(7) Raising Quality of Child-Care 45

SELECTED BIBLIOGRAPHY 46

APPENDICES

I. Sample Survey Package: includes - 48

Letter of Transmittal

Explanation of the Survey

The Questionnaire

Attachments: (1) Child-Care Specialist Career Ladder

(2) Objectives and Guidelines for Associate Degree in Child-Care

II. Daytime Programs for Children A Set of Guidelines 58

III. Sample Comments or Suggestions Made by Survey Respondents 61

IV. Working Women and the Need for Day Care 67

V. Summary of Survey of the Child-Care Needs of Working Mothers (Tippecanoe County Ind. 4-C) 68

ATTACHMENT

Bibliography of Other Manpower Reports Available 72

CHAPTER I

PURPOSES AND DESCRIPTION OF THIS REPORT

1. The Problem

More and more women with preschool age children are entering the labor force -- and need adequate and reasonable child-care services. These very important child-care activities should be conducted by qualified people operating under desirable conditions and appropriate standards and control. Inasmuch as the major functions of a public supported university include education, service and research, it is fitting for Purdue staff and faculty members to concern themselves with the many growing problems in providing comprehensive child-care services, especially in the training of qualified personnel.

There are many diversified types of programs and activities for preschool age children -- ranging from licensed child-care centers having carefully designed child development programs conducted by specifically trained specialists in a planned setting, to a simple, more or less baby-sitting type service at home. To take the first step in the training or education of those engaged in providing child-care services, it is necessary to have reasonably well defined occupations arranged in a career ladder. Altho this has been done in Indiana through the efforts of the State's 4-C Committee,[1/] the problem remains for these occupational titles, duties and qualifications to be understood, accepted and applied.

Another problem is to ascertain the current and projected manpower needs for these child-care specialists (by regions throughout the state), as well as the desired training and educational programs, and the salaries of graduates.

There also remains the question of whether or not to certify or register child-care specialists, and if so, what methods should be used?

Finally, educational, civic, government, religious and other planners must have adequate materials and data to form the necessary background and broad bases for their plans and decisions.

[1/] Refers to number in Selected Bibliography on page 46.

2. Purposes of this Study and Report

First, this study hopefully has helped to standardize and facilitate the utilization of the occupational titles, duties and responsibilities, as well as qualifications of the four levels of child-care specialists all arranged into a career ladder.

Second, this report should provide the staff and faculty of Purdue, and other educational, government, and civic planners with materials and data to assist them in developing recommendations and making decisions about (a) the training and education of new child-care specialists and of upgrading present ones, (b) the certification or registration of certain of these specialists, and (c) policies, plans and actions which will ultimately improve the child-care programs and services in Indiana.

3. Rationale and Methods Applied

This study was guided by an advisory committee made up of representatives from (a) operating child-care centers, homes, and other preschool age programs and activities, (b) State and local government offices, and (c) educational institutions with a variety of disciplines (e.g. child development and family life, psychology, nursing, home economics and others). It was decided to use an extensive mailed survey technique in order to serve as an educational endeavor -- such as describing the child-care specialist occupations and career ladder -- as well as to obtain as much data and suggestions from actual practitioners as was possible. The survey package was designed with these purposes in mind. A complete description of the survey package used and the mail-out and responses are included in the next chapter. A sample copy of the survey used is included in this report as Appendix I.

4. Contents and Format of Report

This first chapter outlines the problems and purposes of the report, the methodology used and a brief description of following chapters. The next chapter describes the survey package in detail and the main parts of the questionnaire; the distribution and the response by type of child-care activity and by geographic regions within Indiana are included. Chapter Three presents the data resulting from the returned questionnaires, plus comments and suggestions made by respondents. Data and information from a variety of other identified sources are presented in Chapter Four. Finally, summary

discussions, conclusions and recommendations are developed in Chapter Five (shown on canary-colored paper for convenience). There is also a Selected Bibliography and a number of appendices and attachments at the end of the report.

"A good day care program"

"We all believe in the American family. It is the bulwark, the keystone, the foundation of the democratic system. Once upon a time it consisted of grandparents, uncles and aunts, cousins, and even friendly neighbors. The nuclear family and the broken family are things of the present. If we are to preserve the family's strength for our children, then we must provide mothers with some of the help they used to receive from the extended family. A good day-care program acts as an extended family, and the parent of a child in good day care does not relinquish that child to others. The mother is a participant and a shaper of the good program". --
Elinor C. Guggenheimer in The New York Times, December 21, 1971.[2/]

CHAPTER II

SURVEY DESCRIPTION

5. The Survey Package

The survey was made up of five sections:

(1) The letter of transmittal,

(2) An explanation of the survey and main parts of the questionnaire,

(3) The questionnaire itself to be completed and returned,

(4) An attachment explaining the child care specialist career ladder and related details, and

(5) Another attachment describing a proposed Associate Degree Program in Child-Care.

(Both attachments retained by the respondent)

Also included with every package was a franked, self-addressed return envelope.

Each section of the survey package is described briefly below:

The letter of transmittal was a short statement soliciting advice and cooperation. It explained that for Purdue to serve better, information was needed concerning what kinds of training and educational programs were desired -- and the possible numbers of new child-care specialists that might be needed.

The survey description explained there were four levels of child-care specialists being applied in the study. Each of the four parts of the questionnaire were then discussed briefly and included: Part I, Manpower Needs; Part II, Needed Training Programs; Part III, Proposed Child-Care Associate Degree Program (2 year college level); and Part IV, Certification or Registration of Child Care Specialists.

The questionnaire was a one sheet (both sides) instrument with lead-in sentences for each part as described above. The first question was designed to learn how many of these child-care specialists were now employed, current job vacancies if any, and future manpower requirements. The approximate monthly salary paid at each level was also requested. An opportunity to write in any comments on this part was provided for. The second question asked how many people from the respondent's activity might enroll now or in the future in training programs -- again with an opportunity to write in any related comments. The third question concerned the respondent's

opinion concerning the need for and desired nature of a "Child Care" associate degree program. Finally, the last question dealt with whether or not specialists at each level should be certified or registered -- and if so, what methods were recommended. Other comments or suggestions were also asked for.

There were two attachments in the survey package. The first contained an explanation of the child-care specialist career ladder, training principles, placement, and in-service training for the CCS-1 apprentice/worker. The job duties, professional qualifications and suggested placement for the CCS-II (associate degree or equivalent) were then presented. The second attachment described the objectives and listed eight guidelines for the proposed Associate in Applied Science Degree in Child-Care which was designed to meet the educational requirements of a Child-Care Specialist II.

NOTE: See Appendix II for article "Daytime Programs for Children" which presents guidelines for child-care programs developed by eight national organizations concerned with children.[3]

6. Survey Mail-Out and Response

Survey packages were mailed to the 969 Indiana licensed day care facilities and all known unlicensed ones (amounting to about 500 additional addressees). Surveys were also mailed to selected community and local civic groups. Hospitals and labor unions were asked to participate. There were only 111 returns -- which is less than a 10 per cent response. The distribution of these responses by region* is shown in Table 1.

TABLE I

DISTRIBUTION OF QUESTIONNAIRE RETURNS

N = 111

Region	Number of Returns
1. Calumet--Lake County	22
2. North Central Area	10
3. Fort Wayne Area	15
4. Lafayette Area	21
5. Indianapolis Area	27
6. Southern Area	12
Area Undesignated	4
Total	111

*For map showing which counties are included in each region, please see Figure 1 at end of this chapter.

The respondents were also asked to identify the type of activity they were involved with. The 111 returns were distributed by region and type of activity as shown in Table 2. A few respondents checked more than one type activity.

TABLE 2

QUESTIONNAIRE RETURNS BY TYPE ACTIVITY

N = 111

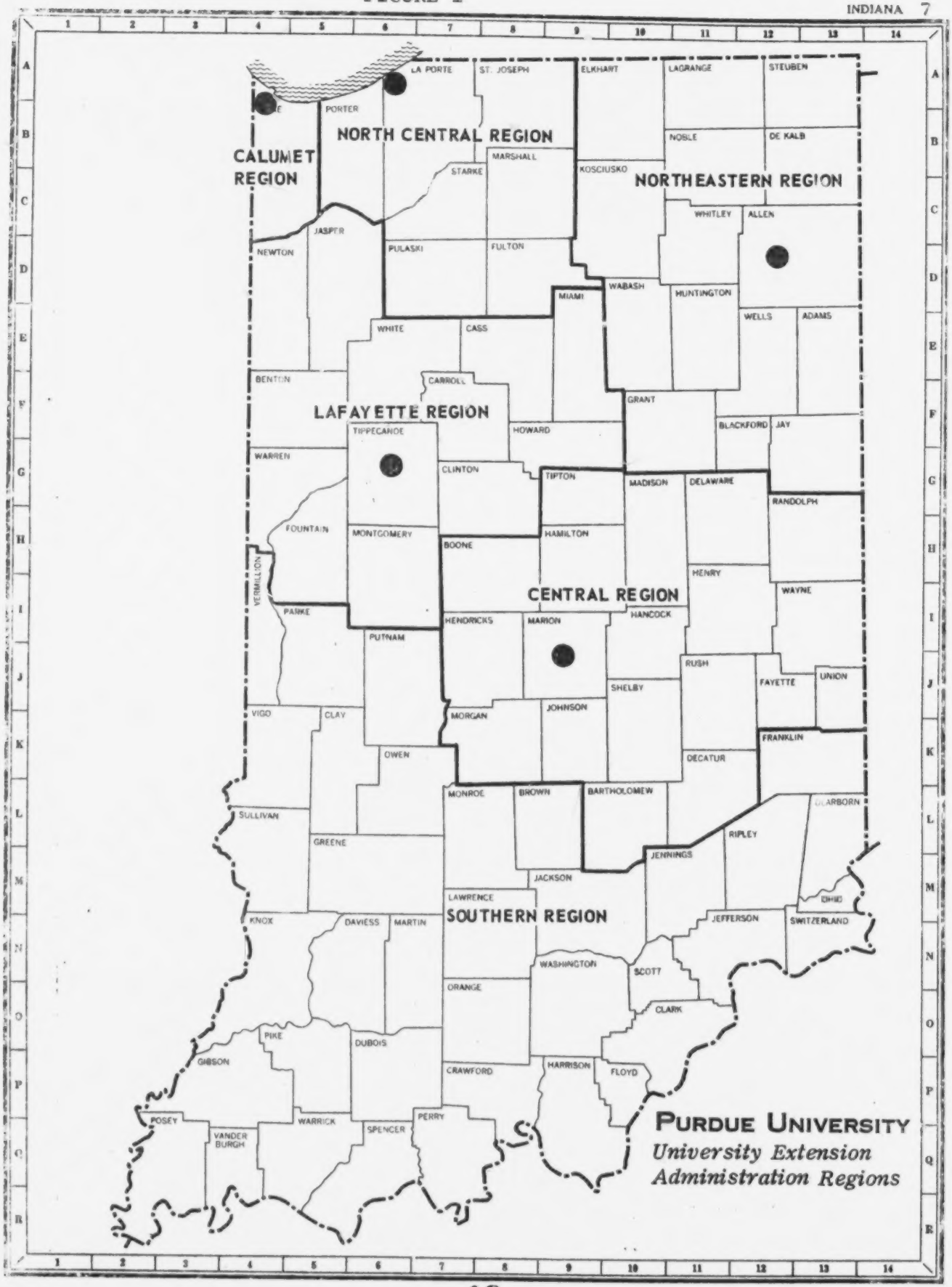
Region	Child Care Center	Child Care Home	Nursery	4-C	Phys. or Mentally Handicap	Head Start	Other*
1. Calumet--Lake County	7	9	3	4	-	1	5
2. North Central Area	2	2	4	-	1	1	1
3. Fort Wayne Area	1	12	2	-	-	-	-
4. Lafayette Area	13	6	2	1	-	2	2
5. Indianapolis Area	5	12	2	1	1	1	5
6. Southern Area	2	6	3	-	1	1	1
Area Undesignated	2	-	-	-	-	1	1
Totals	32	47	16	6	3	7	15

*Includes: Government, Education (e.g. higher education institutions and kindergartens), Civic, Religious or Other Special Activities.

The 32 returns from child-care centers represent nearly 50 per cent of the total mail-out to centers (an exceptionally high response rate). The opposite is true for the child-care homes; there were only about 50 returns from a mail-out of more than 1,000 -- a very poor return about which more will be said later. It should be borne in mind that by and large, these questionnaire returns came from operating activities. Projected estimates based on plans for the future, generally were not obtained. A few responses from local civic groups resulted in forcasts of small future growth requirements. Attempts to involve hospitals, labor unions, business and manufacturing firms were largely unsuccessful.

See Figure 1 on next page for map showing Purdue's six university extension regions.

FIGURE 1


LA PORTE
ST. JOSEPH
ELKHART
LAGRANGE
STEUBEN
PORTER
NORTH CENTRAL REGION
NOBLE
DE KALB
CALUMET REGION
MARSHALL
STARKE
KOSCIUSKO
NORTHEASTERN REGION
WHITLEY
ALLEN
JASPER
NEWTON
PULASKI
FULTON
WABASH
MIAMI
HUNTINGTON
WELLS
ADAMS
WHITE
CASS
BENTON
CARROLL
GRANT
LAFAYETTE REGION
BLACKFORD
JAY
TIPPECANOE
HOWARD
WARREN
CLINTON
TIPTON
MADISON
DELAWARE
RANDOLPH
FOUNTAIN
MONTGOMERY
HAMILTON
BOONE
HENRY
CENTRAL REGION
WAYNE
VERMILLION
PARKE
HENDRICKS
MARION
HANCOCK
PUTNAM
RUSH
FAYETTE
UNION
SHELBY
VIGO
CLAY
MORGAN
JOHNSON
FRANKLIN
OWEN
DECATUR
MONROE
BROWN
BARTHOLOMEW
DEARBORN
SULLIVAN
GREENE
RIPLEY
JENNINGS
JACKSON
LAWRENCE
OHIO
SOUTHERN REGION
KNOX
DAVIESS
MARTIN
JEFFERSON
SWITZERLAND
WASHINGTON
SCOTT
ORANGE
CLARK
PIKE
DUBOIS
GIBSON
CRAWFORD
HARRISON
FLOYD
POSEY
WARRICK
SPENCER
PERRY
VANDER BURGH
PURDUE UNIVERSITY
University Extension
Administration Regions

CHAPTER III

ANALYSIS OF QUESTIONNAIRE RETURNS

As explained earlier, there were four main parts to the questionnaire. Data are shown below for each part as they appeared in the survey. Questions are quoted verbatim and show the total response data for the State followed by data for each of the six administration regions where appropriate. Discussions of the comments and suggestions received for each part are also presented.

7. Manpower and Salary Matters (Part I of Questionnaire)

TABLE 3

MANPOWER: STATE-WIDE

"Please fill in each of the blank spaces, entering a zero or "none", if necessary. (The descriptions of these child-care specialist occupational levels are presented in Attachment 1)."

N = 108

Specialist Level	Number you now have	Addit'l number you need now*	Number you estimate are needed in the next 3 years**	(Derived) Average Number Needed*** Each Year
Child Care Spec. I (Apprentice, asst.worker)	337	40	362	136
Child Care Spec. II (Assoc. degree or equiv.)	125	86	234	108
Child Care Spec. III (B.S. degree or equiv.)	54	34	116	49
Child Care Spec. IV (Graduate degree)	20	31	33	21

*To fill present vacancies.
**Future vacancies due to attrition and new jobs (e.g. expansion).
***Number needed now plus needs for next years ÷ 3 = average annual requirement.

The above table shows a logical pyramid-type structure of distribution by occupational levels. There are more CCS I workers than all other levels combined, yet there are proportionately fewer job vacancies. This probably indicates the relative ease in filling these jobs and training on-the-job (OJT): the data show a decreasing requirement at each subsequent occupational level. More than 100 associate degree or equivalent CCS II's are needed each year, fewer than 50 bachelors degree and only 21 specialists with graduate degrees are needed each year by the respondents.

TABLE 3A

MANPOWER: By University Extension Regions

CCS I, Apprentice or Assistant Worker

Region	Number you now have	Addl. number you need now	Number you estimate are needed in the next three years	Derived Average Annual Recurring Requirements
1. Calumet--Lake County	166	12	246	86
2. North Central Area	19	2	31	11
3. Fort Wayne Area	23	4	5	3
4. Lafayette Area	44	13	35	17
5. Indianapolis Area	58	8	30	13
6. Southern Area	9	-	7	3
Area Undesignated	18	1	8	3
Totals	337	40	362	136

CCS II, Associate Degree or Equivalent

1. Calumet--Lake County	43	62	144	69
2. North Central Area	19	1	26	9
3. Fort Wayne Area	15	-	12	4
4. Lafayette Area	14	14	33	16
5. Indianapolis Area	22	8	18	9
6. Southern Area	7	-	3	1
Area Undesignated	5	1	-	-
Totals	125	86	234	108

CCS III, B.S. Degree or Equivalent

1. Calumet--Lake County	8	19	60	26
2. North Central Area	7	1	6	2
3. Fort Wayne Area	3	-	3	1
4. Lafayette Area	16	7	25	11
5. Indianapolis Area	10	6	16	7
6. Southern Area	6	-	3	1
Area Undesignated	4	1	3	1
Totals	54	34	116	49

CCS IV, Graduate Degree Level

1. Calumet--Lake County	4	27	19	15
2. North Central Area	1	-	1	-
3. Fort Wayne Area	2	-	2	1
4. Lafayette Area	3	3	6	3
5. Indianapolis Area	8	1	4	2
6. Southern Area	1	-	1	-
Area Undesignated	1	-	-	-
Totals	20	31	33	21

It is apparent from the above that the greatest needs were reported in the Calumet (Lake County) Region; this is due to the fact that there were two returns from child-care planning groups having extensive future plans. There were no comparable returns based on comprehensive future plans in any other region (excepting possibly Lafayette), therefore the reported projected needs are undoubtedly low for all regions other than I and IV.

Respondents were requested to indicate the approximate monthly salary at each occupational level they employed. There were 101 respondents of the 111 returns that wrote in some salary figure or related comment. There were many part-time employees, and wherever this was reported, an adjustment was made to determine the monthly salary. Table 4 presents the salary averages reported by respondents and compares these with the average salaries of recent Purdue University graduates at each educational level for CCS II and above.

TABLE 4

SALARY INFORMATION

Average Monthly Salary Comparisons: Survey Respondents With Recent Purdue Graduates at the Associate, Bachelor and Master Degree Levels

N = 101

Specialist Level	Reported Monthly Salary (Averages)	Purdue Graduates' Salaries (Averages) 4/
Child-Care Spec I* (Apprentice, asst. worker)	$310.00 *	-
Child-Care Spec II (Assoc. degree or equiv.	$445.00	$635.00
Child-Care Spec III (B.S. degree or equiv.)	$615.00	$793.00
Child-Care Spec IV (Graduate degree)	$725.00	$980.00

*Based on 176 hours work per month, the approximate hourly rate for these workers would be $1.75 per hour (this is only 10¢ more than the $1.65 per hour minimum level established by the Federal Government for covered jobs -- which include unskilled and semi-skilled personnel).

In general, reported salaries were highest in Regions 1, 4 and 5 and lowest in Region 6.

As can be readily seen in Table 4, the earnings of child-care specialists are low relative to comparable educational and skill levels in general.

Manpower Related Comments

There were about 40 comments written in Part I - Manpower of the questionnaire.

Six persons indicated that they intended to expand their facilities and would need increased staff but they were uncertain about the number. Four other respondents felt too uncertain about future needs to estimate number needed. Three respondents commented that as normal turnover occurred, they expected to replace them with trained specialists; two noted that a low pay scale might be a problem.

At least two directors said they had special manpower needs, Montessori trained personnel in one case and a registered nurse qualified also in child-care in the other situation. Another said they received special training assistance from United Methodist Laboratory School.

Many day care home mothers did not respond fully to the questionnaire, simply assuming that the survey did not apply to them. Two called themselves "foster mothers". Seventeen made special comments essentially to this effect, usually explaining that they had only a very few children in their care, that they were in a small town, or in a very low income area.

Most of the comments concerning salaries were to the effect that it was essential to keep prices (and/or costs) down. That mothers need day care service but cannot afford it and that if prices are kept low, well trained or educated specialists cannot be paid adequate salaries were commonly mentioned in the responses.

8. Needed Training Programs (Part II of Questionnaire)

In order to help in the planning for continuing and/or upgrade type of training and education -- it was deemed advisable to learn the current and future needs for such program at each CCS level. Results are shown in Tables 5 and 5A for totals for the State and for each region respectively.

TABLE 5

NEEDED TRAINING PROGRAMS: STATE-WIDE

"Please indicate the number of people from your activity who might enroll in the programs below:"

N = 93

Type of Training	Number who would enroll now	Additional number need training in next 3 years
Non-college level training for CCS I (apprentice/assistant)	208	426
College-level training (Undergrad.) (for CCS II or III (Assoc. or B.S.)	122	229
Graduate-level courses (M.S. or Ph.D.) (for CCS IV or others)	42	53

TABLE 5A

NEEDED TRAINING PROGRAMS: BY REGION

N = 93

Region	Non-College Level Training # who will enroll		College (Undergrad) # who would enroll		College (grad) level # who would enroll	
	Now	In next 3 years	Now	In next 3 years	Now	In next 3 years
1. Calumet-Lake County	63	236	27	75	20	26
2. North Central Area	47	25	20	25	-	-
3. Fort Wayne Area	10	12	10	15	1	2
4. Lafayette Area	21	40	31	42	5	4
5. Indianapolis Area	53	91	28	58	12	19
6. Southern Area	6	12	3	6	-	-
Area Undesignated	8	10	10	8	4	2
Totals	208	426	122	229	42	53

These data reflect impressive current and projected needs for the non-college type training and under-graduate level college courses for child-care specialists in Regions 1, 2, 4 and 5.

Training Program Related Comments

There were 30 comments written in Part II of the questionnaire.

There was a general acknowledgement of the need for and value of appropriate training. Among the most frequently written comments, was the theme that child-care required love, patience and understanding; a few respondents from child-care homes went so far as to state this was an important - or even more important - than "book learning". Two stated in effect that no college degree was necessary for a child-care home type activity. Somewhat related to this theme, supervised work experience followed by evaluation was recommended as a part of any child-care education/ training program. Four of the day care mothers indicated that although they had not thought previously of receiving any training they now believed they would enjoy it and profit from it. Three persons suggested that there is a need for non-college credit (local) programs as in-service training for present staff. Two said such programs must be local and of low or no cost.

Two directors wrote that they trained their own workers and implied that they could use related training materials. There were four or five comments indicating they carried on simple, small, home-care type activities and they believed the questionnaire and formal training was beyond the scope of their knowledge or operations. However, there was an underlying sentiment that seemed to be centered around expressing a need for help in providing local or in-house low cost training programs for current workers.

9. Proposed Associate Degree Program for Child-Care Specialists (Part III of Questionnaire.)

Because this type of program is not commonly known (it is not offered) in Indiana, special measures were taken in the survey to explain this two-year college associate degree program in more detail. Therefore, a special attachment was included in the survey package describing the objectives of such a program and presenting eight related guidelines. (See Attachment II of sample survey package, which is included in this report as Appendix I.)

The main goals of Part III of the questionnaire were to ascertain if respondents agreed with the idea of starting up such a program -- if not, why not -- and to get any changes or suggestions they might have. Each of these goals is described below:

There were 86 of the 111 respondents who answered the question:

> "Do you agree with the idea of starting up the proposed associate degree program (2 year college level) for child-care specialists?"

77 said YES, and 9 said NO. (All NO responses were from child-care homes.) Thus, 90 per cent answered favorably. This positive reaction was general throughout all regions as shown in Table 6.

TABLE 6

AGREEMENT TO BEGIN ASSOCIATE DEGREE PROGRAM FOR CHILD-CARE SPECIALISTS

N = 85

Region	YES	NO
1. Calumet-Lake County	18*	1
2. North Central Area	7	1
3. Fort Wayne Area	8	0
4. Lafayette Area	19*	1
5. Indianapolis Area	19*	3
6. Southern Area	4	3
Area Undesignated	2	0
Totals	77	9

Regions 1, 4 and 5 have the greatest manpower needs, and also indicate the highest degree of interest in the 2 year program.

Associate Degree Related Comments

There were 39 comments written in Part III of the questionnaire concerning the proposed associate degree program. Twenty-five of these were favorable -- with typical comments such as "Just get going", "I am for this program", "There is a need for this program to move the level of child-care up higher." Several liked the planning and approach being applied, some mentioned its importance, and another said it coordinated well with Headstart training.

The need was also mentioned for evening classes "so we who are day workers can attend". Costs were mentioned by five people: "Child-care doesn't pay enough to afford college education", "Yes, to the program need -- but college costs money" were among the remarks; two said college costs were prohibitive for them.

Three respondents mentioned the need (and opportunity) for those already possessing college degrees or having had college work in other fields to engage or transfer to child-care studies. A typical comment was "With the overflow of degree people who cannot find teaching jobs, I think there should be a modified program -- to help them teach preschoolers". "Older women should also be encouraged to attend", said another. One wrote that she believed it should not be necessary to have a college degree or have completed a formal training program for day care in one's home -- but for someone in an institution, it was a different matter.

Not all were favorably disposed. Seven respondents believed that "mother sense" and experience are better than formal training. Two said it was impossible to 'go away to college'. Two others expressed the fear that if associate degree programs were made available, then they soon would be compulsory, and one went on to say it could become a requirement for certification as a CCS II. Two mentioned they thought in-service programs would meet all training needs.

Suggestions about content of the training program include: how to counsel parents, parent education, first aid, the sick child, individuality, play, crafts and art, music, cultural differences, urban problems, bi-lingual education, and simple accounting. The admonition to include MORE and MORE work with children came over and over again.

10. Certification or Registration of Child-Care Specialists (Part IV of Questionnaire.)

Only 76 of the 111 respondents completed this part of the questionnaire. The results are shown in the table below.

TABLE 7

CERTIFICATION OR REGISTRATION

"Do you believe any of these child-care specialists should be certified or registered? If YES, please check the method(s) you believe are most applicable or identify any alternative method you recommend for each level."

N = 76

Occupational Level	Should be certified or registered YES	NO	Method(s) Recommended: State Board type examination	Graduate of approved program	Recommended by qualified practioner	Experience No. Respon.	Experience $\bar{x}$ # Mos.	Some other Method*
Child Care Spec I	49	27	11	12	36	28	8	5
Child Care Spec II	59	9	12	32	25	22	9	2
Child Care Spec III	60	3	24	44	21	15	12	2
Child Care Spec IV	56	3	25	44	22	14	18	1

As can be seen above, generally speaking, the higher the occupation level of the child-care specialist, the more agreement there was for certification or registration. Only 49 respondents believed the CCS I should be certified with 27 opposed (also please recall that 35 survey respondents didn't answer this question). The most common method recommended by those who thought the CCS I should be certified was "Recommended by a qualified practioner"; and more than half of these stated some experience should be required (the average of times mentioned was 8 months' experience).

It was mentioned by a few that entry into Child Care Specialist I level should largely be unrestricted at the entry level, but as knowledge, skill and performance abilities were acquired and demonstrated, qualification at succeeding levels should be recognized.

There was much more agreement for certification of the CCS II through IV and the need for completion of an approved program. Again, the need for increased experience at each ascending level was reported -- but by fewer respondents in each case.

State Board type examination was not a popular choice, but was most often recommended for CCS III and IV levels.

Certification or Registration Related Comments

These data reflect a general agreement that there is little necessity for rigid certification, graduation from an approved program, or State Board type of examination for CCS I level specialists. However, the value of experience and judgement of the supervisor are clearly reflected as primary considerations for determination of qualification at this level.

Ten respondents in effect said that designation of the qualifications or competence of the CCS I worker should be within the purview and authority of the Center or Program Director or equivalent person. Five others stated that obtaining a degree should not be mandatory for CCS II -- that equivalency should be determined and certification be granted accordingly. It was reiterated that in the final analysis, actual performance and demonstrated abilities were proof of qualification.

Five others suggested that in-service or on-the-job training should be given consideration when certifying any child-care workers. Three respondents said that applicants should be observed on the job in addition to or in place of examination. Two requested greater emphasis be placed upon experience. Two mentioned the need for an avenue to certification through practical experience and knowledge, without requisite formal education.

Two persons said that no license should be given without a "trained person" in charge. On the other hand, another thought that a "good" person should be able to get a child-care type job even if not registered. One comment was that financial upgrading must go along with upgrading qualifications.

Two other viewpoints: "A person should not be certified or registered, but the school should be licensed and then only when there are qualified persons working there", and "I have yet to see a state sponsored certification or registration program that was worth its weight in salt."

A rather extensive comment suggested that the Civil Service System, as used by other service agencies might serve as a model. The idea was offered that eligibility for certain funds (e.g. government) be contingent upon having achieved accreditation or minimum standards. This would help provide incentives and assist in control.

11. Other Comments or Suggestions

Respondents were provided the opportunity to write in any final comment they might have after completing the four main parts of the questionnaire; they took advantage of this opportunity! There were 65 written statements.

There was recognition of the need for highly trained professionals for policy making, administration and education, through para-professional levels, practitioners in child-care homes and new entrants. The suggested "career ladder" was well received.

There were many comments stressing the need for love and understanding (some saying this is much more important than "book learning"). Many wrote that to take care of children in day care homes -- little or no formal education was needed, but desire to do this work and some practical training and good guidance would be helpful.

There was a need for securing federal funds for day care expressed by several. Some who favored increased qualifications said they would need outside financial assistance to be able to afford it. Others said they couldn't afford to pay salaries of educated or highly trained people; or they couldn't afford to go to school themselves; or they couldn't prepare for certification or upgrading their services without some financial help.

Time after time, concern was expressed about day care homes. Three would like to see licensed day care homes meeting the same standards as licensed day care centers. Five believe that training for home care mothers should be planned and required. (This thought was affirmed by several mothers who asked where they could enroll in an associate degree program, take a course occasionally, or participate in correspondence courses.) One mother ended her concerned comments with, "Come and talk to me."

Two respondents expressed opposition to state control over licensing and certification because it seemed a small step to state control of child rearing. One of these respondents believed that child centered programs should benefit greatly from education and training of staff members. Another person suggested that there is a great need for a community education program about child care.

Generally, the value of formal training/education was recognized by many respondents for the CCS II and higher levels -- a few asking to be informed when and where such programs were to be offered. There was a variety of comments to the effect the level (quality) of child care services should be raised. The idea that training could be done "in-house" was suggested a few times, particularly at the CCS I and II levels.

NOTE: There was a wide range in the clarity, nature, type of expressions and spelling etc. of the comments received. A number of them could not be deciphered and some were incomplete or not at all clear: others were erudite and reflected careful preparation. A generous sampling of comments verbatim, is presented as Appendix III.

CHAPTER IV
NATIONAL and GENERAL STATE INFORMATION CONCERNING CHILD-CARE

This chapter is made up of a series of eight selected topics obtained from the literature. The materials are largely extracted from publications which are identified by numbered footnotes as listed in the Selected Bibliography. Hopefully, this information will provide some background and help to fix perspective in the complex area of child-care.

12. The Changing Nature of Day Care[5/]

In recent months, "day care" - an awkward and somewhat insulting term that few people used in either professional or personal vocabularies as recently as five years ago - has become a household term.

Early literature on day care generally took special pains to differentiate day care from education. For example, in the 1960 edition of the Child Welfare League of America's Standards for Day Care Service, one finds day care defined as follows:

> "Day-care service has to be differentiated from the nursery school or kindergarten, and from extended school services and other programs for school-age children offered as part of elementary school systems. These have education of young children as their main purpose. The primary purpose of a day-care service is the care and protection of children. This purpose, the reasons for which a child and family may need it, and the responsibility shared with parents, distinguish a day care service from education programs."

Since 1960, many changes have taken place. To name a few: more mothers with children younger than six have gone to work outside the home; some employers are turning to day care programs as a way of attracting female workers and reducing absenteeism; advocates of civil and personal rights for women, stressing that personal fulfillment is a right, have demanded quality day care services for those who want it; federal, state, local and other sources have provided increasing assistance; and perhaps the most fundamental influence of all -- the steady flow of information about the importance of early childhood years.

The professionals who give semantic shape to social trends have not been indifferent to the new demands and conceptual changes. In 1969, The Child Welfare League's Standards was revised:

> "At present, a wide range of resources and facilities, including informal arrangements and organized programs under various auspices, is used for the care of children outside of their homes during some part of the day. These resources and facilities have been established to serve many different purposes. They place differing emphases, reflected in their programs and the children whom they serve, on the responsibility for care, protection, child development, education, or treatment."

This new statement recognizes that care and protection involve an inherent developmental and educational component. Day care can no more be separated from education than it can from welfare or health. In breaking away from the earlier narrow concept that artificially tried to separate the two patterns of service, the day care movement in this current definition has now given itself a new charter.

In a second radical departure from the earlier concept, the new Standards suggests that day care services may be offered more as a service to the mother than to the child. The pamphlet states:

> "Day care programs are promoted and used for purposes in which the interests of the child may be a secondary consideration. Day care is provided to allow mothers, particularly those who are unmarried, to complete their schooling or to train for new careers; to help financially dependent mothers attain self-support and to reduce public assistance expenditures; and to recruit women for, and retain them in, the labor force."

The league is not an organization that can lightly take the subordination of the needs of children, however, and the report goes on to caution:

> "Under these circumstances, it is necessary to ensure that day care is in the best interests of the individual children, and that the daily experiences are of benefit to them, or at least not detrimental."

In a subsequent section of the new Standards, a third subtle but major conceptual shift is encountered. While the old Standards declared, "The primary purpose of a day care service is the care and protection of children," the new version states, "The primary purpose of a day care service is to supplement the care and protection that the child receives from his parents." It seems as if the field were more willing to share the responsibility at this time, or else were

more aware that care and protection for the young child attempted in loco parentis has little chance of providing much of either. The implication is that the family carries the major burden and the day care service only supplements the family's endeavors.

The varied purposes of day care are reflected in a healthy diversity of programs. They include care provided by family members or baby-sitters, day care centers operated as demonstration and research agencies, centers controlled by parents or offered as a public service by a church or secular organization or provided as a lure by industry, and centers run forprofit by a private operator or as a franchise unit of a national corporation. Still relatively scarce are programs that involve a complete blending of day care with education.

Because of its importance in the lives of children, one can imagine day care becoming a bold instrument of social policy. In fact, day care has not made policy; it has followed along when policy has been made. It has grown somewhat haphazardly, changing its own definition every ten years or so. At present it does not know whether it should serve the child, the parent, or the family. It cannot make up its mind whether it is a service for families with social pathology or for all families, whether it should be limited to children from economically underprivileged families or be offered to all children, whether it wants to change children or preserve cultural styles from one generation to the next. It does not know where to obtain its official identity. This confusion can be seen in state licensing patterns. The welfare department handles licensing in thirty-six states, the health department in five, and some different agency or combination of agencies in the remainder. The department of education is the licensing body in only one state, although it shares the task with welfare in one other and makes recommendations in many.[5/]

* * * * *

12. Cont'd. This same kind of conclusion is reflected in the following excerpt from Day Care in America.[6]

> Day Care in America is a scattered phenomenon; largely private, cursorily supervised, growing and shrinking in response to national adult crises, largely unrelated to children's needs, and, unlike the situation in many other nations, totally unrelated to any national goals for children or explicit goals of encouraging well defined character traits. Even today, the major motivations expressed for expanding Day Care are not child-related; they are related to freeing women for employment outside the home.[6]
>
> There are many exceptions to these generalizations, and they serve to point up the discrepancies between what we are able to do for children, and what for the most part we are not doing.

13. "Quality" Child-Care.

The Office of Economic Opportunity (H.E.W.) sponsored a study of quality child-care in the United States. In Volume 1, Findings from A Study In Child Care.[7] some general answers were provided as follows to questions, How can quality child-care be described? How can it be provided? How much does it cost?

> "(1) Good and excellent child-care come in many forms, varying with respect to parents' and providers' values and the resources available. We find there is no one kind of 'quality child-care: there are many.
>
> (2) Good and excellent child-care are now being offered by a wide variety of sponsors: welfare departments, inner-city community organizations, private industry, religious groups, research foundations. Within school departments, on Indian reservations, in private homes, in the ghetto, in migrant camps, in the suburbs, good child-care is to be found in heartening profusion.
>
> (3) Good and excellent child-care are very hard to guarantee. The wide diversity described above has one common thread: enormous human effort lies behind every center we visited. Like other studies, this report has a few hypotheses about standards, but the most important aspect of quality child-care is the human effort and devotion which are its chief characteristics: a child-care center is its director and staff.
>
> (4) It's expensive to provide good and excellent child-care. People accustomed to costs in lower-quality public schools, people who have seen only part-time child-care or who have worked with volunteer child-care, are likely to be taken aback by the real cash costs of full-time care for young children. Costs of child-care in our survey range from $1,200 to $4,100 per child per year. (No centers were caring entirely for infants, who as a group are more expensive to care for.) About four-fifths of the real costs of child-care are personnel costs; variations in per-child costs are therefore highly predictable. Knowing the staff-child ratio at a given center and where in the country it is located allows one to predict within narrow limits how much the given arrangement will cost. Thus the staff of a child-care center is its principal aspect with respect both to quality and cost.[7]

14. Day Care Provided by Industry.

The following excerpts from an article in Industry Week[8/] reflect some views on this subject.

"CRADLE TO GRAVE" is becoming more than a quasi-humorous description of employee benefits. In the near future -- if unions, working mothers, and Women's Lib have their way -- it could be a very literal reality. Some day, day care of employees' preschool children might take its place on the bargaining table along with disability benefits and vacation.

"Even in the absence of union pressure, companies may find that they will have to provide day care to remain competitive and reduce turnover. It's a fact of life that more mothers are hitting the job market for a variety of reasons ranging from economic necessity to boredom with housework. The day care issue won't necessarily unleash a host of union-company hostilities. Enthusiastic endorsement of a joint labor-management program comes from Mel Bourne, administrator, health and welfare fund, Baltimore Regional Joint Board, Amalgamated Clothing Workers of America.

"The 70 manufacturers in the five state region, pay 2% of their gross payrolls into the health and welfare fund, which is administered by union and company representatives. Most of that money is poured into the day care projects, says Mr. Bourne, and since the program was initiated in September 1968, $3.5 million has been spent on it. Four centers with facilities for a total of 920 children are in operation, and a fifth is halfway to completion. Mothers or fathers who are union members may enroll children from two years to first grade age at the cost of $5 per child weekly.

"All the buildings are new, and there is a nurse at each in addition to other personnel. The children are given breakfast, lunch, and a snack, and they receive free physical examinations and immunization shots from a pediatrician who visits once a week. Each center has its own director, 'usually from the educational field,' explains Mr. Bourne.

The cost to parents is low, and 'now some women are going to work who previously couldn't.'

"We hope that absenteeism has decreased, although there have been no studies done on this,' Mr. Bourne explains. Employers also benefit, he says, by having a larger manpower pool from which to draw.

'This is the first real union-management effort in day care that we know of,' the administrator adds. Although day care was not a negotiable bargaining item when the board brought it up three or four years ago, now it has been approved under the Taft-Hartley Act. 'In certain industries where a high percentage of women are employed, it is going to grow as an issue. And Congress will get more interested in it. When federal funds become available, I think industry will do more in day care. Interest in the last two years has grown and grown...'

At Arnav Industries Inc.'s Tioga Sportswear Division, Fall River, Mass., a program in effect since 1962 has halved turnover and reduced absenteeism, says Gus Davi, plant manager.

The cost was held down because Tioga utilized church facilities across from the plant for the center. The initial investment was $5,000 and the annual cost is $20,000. Nursery school activities are provided for 30 children from three to five years old, and the only charge to parents is 60 cents a day for lunch. Staff includes a child-care specialist, a qualified teacher, and two aides.

'We think the center has been a great advantage to employees and management,' observes Mr. Davi. 'There's no question that it has minimized labor turnover and created a better relationship with employees.'

On a larger scale, Skyland Textile Co. operates a specially built center for children of employees and others at Morganton, N. C. The program started with 18 children in July 1969, and enrollment has grown to about 104 children from age two to school age.

Employment at Skyland is about 96% female. A high turnover rate coupled with a tight labor market made the center a necessity. The company subsidy for the first year totaled $32,000 but that included startup costs, explains Med Thompson, personnel manager and day care administrator. Skyland employees pay $11.50 per child weekly for the first child, the rate for two children is $18, and the scale descends for more. Outsiders pay a flat $14 per child weekly rate.

'Most of the advantages are intangible and hard to measure,' says Mr. Thompson. With peace of mind about her children's welfare, 'the mother does a better job,' and there are indications of an increase in production and attendance.

'Within five years, day care is going to come in some fashion to industry,' he notes. 'But before industry becomes serious about it, it will have to be 'good business.' I hope, however, that companies do accept the idea."[8]

Recently, the Women's Bureau, U. S. Department of Labor reported on 11 companies operating day care centers for their employees' children.[9] The Conclusion on the value of programs included the following:

"Companies reported a number of positive findings in the operation of their day care programs. Almost all reported that recruitment of personnel is markedly improved and absenteeism and labor turnover are reduced. Vanderbilt Shirt and Tyson Foods felt that because they offer child-care services they have been able to attract more steady and dependable workers. In their reactions, Avco and Skyland Textile emphasized the increase in productivity of employees who are using the services. Companies also reported that the program improved employer-employee relations. Several of the companies plan to expand their program or establish additional programs in other plant locations."[9]

The report goes on to say additional centers are being planned by industries, unions, hospitals and government at all levels.

15. The Child Development Associate: A New Child Care Profession.[10/]

The Director of the Office of Child Development and Chief of the Children's Bureau, U. S. Dept. of H.E.W. has begun implementation of the development of a program for the new profession of child-care workers -- the Child Development Associate. This person's role is seen as that of a competent professional staff person in programs for young children who must:

1 Understand and be knowledgeable about children,

2 Be able to provide valuable experiences for preschool children in part-time or full-time programs or in extended day care, and

3 Have achieved the minimum competencies of a good preschool teacher. (This Associate will not replace the bachelor and master degree teachers or supervisors.)

Training for the program and the entry into this system, encompasses at least three possibilities: college based programs, supervised internship programs and work study programs. New and innovative forms of entry into the systems are being studied.

The program features are:

1 A delineation of the competencies that one would want of an individual responsible for the care of children,

2 The development of training programs which will permit individuals to obtain these competencies, and

3 The development and implementation of procedures that will effectively assess whether the individual does indeed possess these competencies.

A system is being developed which should accomplish several objectives. First, this system should give recognition to those persons presently performing competent work with young children. Second, field training and on-the-job experience should be measured and become "legitimate". People who have gained competencies either through experience or formal education or a combination of both should have the opportunity to become Child Development Associates (e.g. "certified"). Through the program, persons presently working in early childhood programs could be assessed and those unable to meet requirements assisted in doing so. Third, new training programs should be initiated and existing ones designed to develop the needed competencies.

This nation is confronted with a very real need for qualified child-care workers... the need must be met successfully.[10/]

Child Development Associates were also discussed in Hearings Before the Senate Committee on Finance on 22 September 1971.[11] The following data were included:

- The population of children under six in the United States now approximates 21 million (fewer than 20% were served by preschool programs). Since 1960, the number of licensed day care facilities has tripled and the number of children in other preschool programs has doubled. If this trend continues, kindergarten and nursery school enrollment will increase from 3.9 million children in 1968 to 6.3 million in 1980 --- with emphasis and support from Federal sources it is likely the 1968 enrollments will be doubled by 1980.

- There is at present a shortage of trained personnel in programs for young children; if enrollment in programs providing day care continues to swell, a corresponding shortage of staff personnel can be foreseen.

- The Child Development Associate is needed to help meet qualified child-care worker requirements and to raise the level of child-care services. These Associates would be trained in programs different from and less than the traditional 4-year college program (they would not replace the baccalaureate/masters level teacher).

- Individuals would be certified as Child Development Associates based on demonstrated competency rather than on completion of courses or acquisition of credit hours. This will permit recognition of people already in the field who are qualified through experience but may not necessarily have had formal educational opportunities. The certificate should be "nationally negotiable" and awarded in conjunction with a national system. Candidates for the Child Development Associate Certificate should be observed and evaluated by teams of recognized consultants designated through the national system.

- The educational/training 2 year program should follow the guidelines and objectives developed through the Office of Child Development (HEW) and include both practical and training experiences.

- Possible types of program arrangements include:

  1 College-based programs (e.g. junior and senior colleges and universities).

  2 Supervised internship programs (e.g. may be based in selected day care centers, Head Start programs, Parent and Child-Care Centers, nursery schools or kindergartens).

  3 Work-study programs (e.g. students are actually working in early childhood settings for income while completing their training program -- such as 1 or 2 above).[11]

16. Child-Care Arrangements of Working Mothers.

There are very few sources of accurate information on the child-care arrangements made by working mothers.[12] Those that are available show that for preschool age children whose mothers work, care in their homes rank first, with care in someone's else home a close second. A weak third place goes to group care in day care centers, nursery schools and the like. Adequate State and local data or child-care arrangements are almost nonexistent.[13]

Data from the Bureau of Labor Statistics suggest that more mothers might work if more day care facilities were available; however, these data in themselves do not provide an adequate measure of need for these facilities. And of course, there remains the key problem of child-care costs. For example, who should pay -- the employed mother, her employer, Federal, State or local government, or combinations of these, or even other alternatives? The answers to date are debatable.[14]

The need for child-care services, other than those provided by relatives, is often inferred from the number of children under 6 years old whose mothers are in the labor force. This might lead to erroneous estimates of need. In March, 1970, 5.8 million children under 6 had working mothers. However, there is no evidence which shows that all, or even a large proportion, of these childrens' mothers would make use of child-care services even if they were available. There is a growing need for good data.

17. A Governor's View of Welfare and Child-Care.

Governor Ronald Reagan of California was interviewed on the subject of welfare programs and their costs.[15] Among other points he made was the fact that welfare women could be helpful in child care. Quotes from the interview follow:

> "Back in WPA days, there were women who could work and had job skills, and many had small children. What do you do about their children while they're working? You found with these women who were given jobs in WPA there were other women who didn't have job skills -- so they were given jobs taking care of the children of other women.
>
> There's no reason in the world why this couldn't be done again. You could set up child-care centers, but, again, what has happened? The regulations call for people with master's degrees and professionals as the only ones who can take care of these welfare children. This is ridiculous.
>
> You can have a supervisor, someone in charge of a child-care center. Then you can use some of these welfare women in schools as teacher's aides. There are any number of things that these women could be doing that would be helpful...

"The terrible thing is that millions of these women on welfare would like to work...

"There are churches scattered all over every neighborhood with physical facilities. Suppose that government -- instead of declaring that everything has to be so grandiose and has to be so official, and has to have a person with a teacher's certificate in charge of these kids -- suppose instead you were able to enlist the churches. All churches are in need of money. Pay some token rent for this facility, then see how many volunteers you get."[15]

NOTE: The authors agree that many welfare mothers could make excellent child-care workers.

18. National Day Care Staff Requirements, (With Derived State Needs)

The Congress of the United States has been discussing day care facility expansion -- which have brought estimates that 10 million persons may be needed to staff them.

The estimate was made in a research study by the Education Day Care Division of UEC, Inc., which was presented to the House Select Labor Subcommittee.[16] The study also found that greatly improved training programs are required for these staffs.

Based on 1969 population figures, the study estimated that 59.3 million children may be cared for in the centers. To serve these children, the study said 6.8 million staff workers would be required. In its projections, the report said 8.4 million children of low income families and 18.5 million of working mothers should be cared for under expanded day-care programs.

The report also said that a misconception exists that anyone can handle children and that special training is not required. "The proliferation of programs has created a crises in staffing", the study added. "The problem has been met by using inadequately trained staff." The study found that greatly improved training programs are required, and that "the quality of much of the training is poor -- especially -- when provided on an in-service basis, where most of it is furnished."[16]

Indiana's population is approximately 2½ per cent of the National total. Applying this percentage to the estimated 10 million required staff members, Indiana's share amounts to 250,000 trained child-care staff members!

***

The increasing number of working women underscores the need for day care, continuing training and part-time employment. The labor force participation of married women with children has increased significantly during the last ten years (from about 10 million in 1948, to 17 million in 1958 and about 27 million by 1970). See Appendix IV for more details.

19. State and Regional Licensed Day Care Homes and Centers.

It appears that in general, the proportion of capacity of day care homes in Indiana, based on population, is better than the average throughout the United States; however, the capacity of day care centers in Indiana appears to be below the National average. (These comparisons are based on provisional 1969 data.)

TABLE 8

LICENSED/APPROVED DAY CARE CENTERS AND HOMES

(COMPARISONS OF SELECTED MID-WEST STATES)

	DAY CARE CENTERS			DAY CARE HOMES			POPULATION U.S. = 201.3 Million
	Number	Capacity	Percent b/	Number	Capacity	Percent b/	
United States (Estimated Totals)	11,800 a/	478,300 a/	100%	32,700	120,000	100%	100%
Illinois	414	16,963	3.6%*	1,945	6,069	5.1%*	5.5%
Indiana	60	2,445	.6%	905	3,968	3.3%	2.5%
Kentucky	305	7,466	1.6%	N/R	--	--	1.6%
Michigan	365	18,423	3.9%	1,057	5,709	4.8%	4.3%
Ohio	95	3,517	.8%	63	197	.2%	5.2%

a/ Does not include 1,200 centers with a capacity of 39,700 children which were not reported by auspices.

b/ Per cent of total capacity.

Source: U.S. Dept. of Health, Education, and Welfare, (March 1969 Provisional data) 17/

20. Past and Present Practices -- and Planning for the 1970's.

A Background Paper on Day Care and Preschool Services was prepared by the Office of Child Development, (H.E.W.) for the 1970 White House Conference on Children and Youth.[18] A summary was made assessing the past and present practice, and another outlining the issues and options in planning for the 1970's. Excerpts follow:

Assessment of Past and Present Practice

The majority of children involved in child-care arrangements are cared for in informal settings, without formal programs or trained staff.

For those utilizing organized facilities, three major trends over the past decade are discernible:

1. An increase in the number of formal child-care facilities distributed in relatively stable proportions among private, non-profit and public auspices;

2. An increase in the extent of Federal involvement in providing funds for day care and preschool services.

Federal involvement in preschool and child-care is directed primarily at serving children of the poor. In actual numbers, only a small percentage of this group is reached. Some of the programs have been initiated primarily to serve the needs of the working, or potential working mother, if training and jobs were available. Others have a child-development thrust. Still others are grounded in providing social service.

3. A two-pronged pattern reflecting economic and racial stratification: fewer poor children proportionately are enrolled in any kind of service than children from affluent families; white children are more likely to be enrolled in preschool programs; and minority-group children are more likely to be enrolled in day-care programs.

There appear to be several reasons why preschool and child-care services are discriminatory and so minimally developed:

First, it has long been popular opinion that young children should not be separated from their parents. Within this framework, child-care has been seen as an undesirable child-rearing practice.

Second, it has only been relatively recently that child-development specialists have been able to spell out convincingly the adverse implications of not focusing on early child development.

Third, until fairly recently, the particular needs of poor children for early childhood services have not been so highly visible (nor for that matter have the needs and rights of their parents).

Fourth, the trend for women to become a more substantial part of the labor force has increased need for day care.

Until recently there has been minimal demand for universally available child-care or preschool services. This appears to be changing. Recent data suggest that there is more interest and support for child-care, and more women would like to work if adequate day care programs and facilities were available.

Issues and Options in Planning for the 1970's

Clear goals for a comprehensive child-care and child-development program are lacking. These objectives should answer such questions as whether society should be responsible only for the disadvantaged or should it make a universal commitment to the needs of all children?

Current sponsoring auspices include child-welfare services, educational systems, community-based or consumer groups, and segments of the private sector. Services under each aegis have different emphases, and different goals ranging from primary concern about freeing the mother for work, to stimulating positive development in the child.

An effective financing mechanism is also lacking. Public funds are inconstant and, within the current national priority system, inadequate to support a massive implementation network although they are useful in stimulating the development of demonstration models. Private sector involvement has not been proven clearly profitable, and forces for profit may at times conflict with service needs. Groups most in need of services are least able to pay for them. No alternative mechanism has been defined to provide a continuing source of revenue, although such programs as child-care corporations are contemplated.

There are in development plans: (1) to channel resource personnel into child-care, (2) to train a new corps of paraprofessionals and professionals(3) to increase the supply of new or renovated facilities, and (4) to monitor the effectiveness of the programs.

There is inefficient utilization of existing resources, both program and financial, and coordinating mechanisms are inadequate or non-existent both within the Federal Government and in the community-at-large.

Complex licensing processes do not always meet the goals of protecting the child and upgrading services.[18]

***

SPECIAL REPORT OF SURVEY OF WORKING MOTHERS

During April and May of 1972, sixteen private employers in the greater Lafayette Area cooperated in a survey of child-care needs of working mothers conducted by the Tippecanoe County 4-C Program. The survey was completed by 633 working mothers with children under 14 years of age. The questions focused on current child-care practices, personal child-care needs and what the working mother preferred in an ideal child-care plan. The survey also requested information about working hours, family income and age of children.

The results of the survey are summarized in Appendix V.

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The next chapter presents the final discussion, findings and recommendations of this report.

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CHAPTER V

DISCUSSIONS, FINDINGS AND RECOMMENDATIONS

21. Discussion and Findings

(1) The Committee. The technique of forming an advisory committee made up of representatives from operating day child-care homes and child-care centers, from appropriate government and civic organizations, from educational institutions and parents, was found to be very successful. The objectives of the study, problems, kinds of data needed, who should be surveyed and how to do so, etc. were discussed and effective lines of action and instruments were developed.

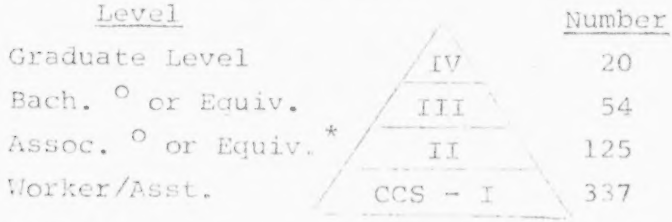
The need to "educate" practitioners in the field concerning the child-care specialists' career ladder (e.g. occupations, functions and qualifications) was recognized. Descriptive materials were developed and distributed to more than 1,400 appropriate addressees (these descriptive materials were kept by the respondent for future reference -- only the questionnaire was returned).

The committee members were aware of the fact that day care can be an important vehicle for child development services and acted accordingly.

(2) Survey Response. The return of only 111 questionnaires from the 1,400 mailed out was rather poor. These returns were reasonably distributed throughout the State, except that the returns from the Fort Wayne Area were exceptionally sparse. However, 32 of these returns were from child-care centers which represented nearly 50 per cent of the mail-out to such centers....the opposite is true for the child (day) care homes, there were only about 50 returns from the more than 1,000 mailed out (the unlicensed day care homes' operators in particular largely ignored the survey). This may reflect a laissez-faire attitude, although some responses from day care homes expressed concern about government control or unduly high standards being imposed on their operations or personnel; others said they must keep costs down, a few said they weren't qualified to participate in the survey. (Note: the authors speculate that many day care home operators were fearful that in responding they might jeopardize their eligibility to continue operations.) One might conclude that there is a lack of desire and readiness of many operators of child (day) care homes to formalize child-care specialist occupational titles; functions, qualifications, certification, and

related matters. Although this survey probably did not get at many pressing child (day) care home problems, there were some important findings derived from the data that were acquired. When one thinks of child-care, the image that typically comes to mind is the conventional center with from 20 to 30 children. What is often overlooked is that the bulk of children who are presently in day care are in family day care homes which typically serve 4, 6 or 8 children.[6/]

(3) Manpower: Current Situation. The child-care specialists (CCS) now practicing, as reported by the 111 respondents, fall into a logical pyramid-type structure of distribution. There are more than twice as many people in each ascending specialist occupational level as shown in the illustration.



*This child-care specialist is called "The Child Development Associate" and related implementation actions have been announced by the Director of the Office of Child Development, U. S. Department of Health, Education and Welfare.[10/ 19/]

There were more than twice as many current job vacancies reported for CCS II's than I's, (86 vs. 40), which indicates that CCS I workers are being recruited and trained locally with some success, whereas there is an apparent shortage of CCS II level personnel. Undoubtedly there is even a greater proportion of CCS I's (and perhaps II's) than shown -- because the largest portion of surveys mailed to child-care homes were not returned, and these operations usually do not include many college-trained personnel.

These data substantiate the need for the Associate Degree level program as well as for providing other means of attracting and qualifying people at the II level. The current job vacancies for CCS III and IV specialists (34 and 31 respectively) also reflect a shortage of college-level personnel at the baccalaureate and graduate level practicing in the child development fields. -- However, low salaries, rather than a shortage of personnel, may be the crux of the problem, as discussed later -- .

(4) Manpower: Annual Recurring Requirements. The numbers of child-care specialists needed at all levels, as reported by the 111 respondents, are quite impressive. The derived* annual requirements for each CCS level were as follows:

CCS I	(Worker/Asst. level)	136
CCS II	(Assoc.°/Equiv.)	108
CCS III	(Bach°/Equiv.)	49
CCS IV	(Grad. Level)	21

*One third of current vacancies plus one third of requirements reported for the next three years.

Most of these requirements were reported for three regions: (a) Calumet (Lake County), (b) Indianapolis Area, and (c) Lafayette Area. (Fort Wayne Area returns were sparse and reported requirements were low.)

NOTE: A conservative inflation to the State universe of annual recurring requirements can be made by multiplying the reported requirements by a factor of 3. This is derived considering that approximately half of the 60 day care centers and fewer than 10% of the 1,400 day care homes responded to the questionnaire. When this is done, the approximate annual recurring requirements become:

CCS I 400 CCS II 300 CCS III 150 CCS IV 60

The approach used in this study was to identify current and projected requirements for child (day) care specialists. Most of the questionnaire returns came from child-care operating activities -- there were no extensive future plans that were reported by hospitals, business or manufacturing firms, labor unions or the like. Therefore, the reported projected requirements should be considered as representing lower parameters.

Another approach might be to examine current and projected needs for child-care homes, centers and related services, or populations of working mothers with pre-school age children -- then translate these into trained manpower requirements. This was not done because there is undoubtedly a very large gap between what is theoretically "needed" -- and what can be afforded or provided.

(5) National Day Care Staff Requirements and Derived State Needs. In a research study made for the Congress of the United States, it was found that approximately 10 million trained staff members would be needed in the Nation to provide adequate day-care services. (Based on proportion of population, Indiana's share would be ~250,000!). The study also reported that the quality of much of the training is poor -- especially where provided on an in-service basis.

In hearings before the U. S. Senate Committee on Finance, it was stated that preschool program enrollments would probably double by 1980. It was also stated that there is a shortage of trained personnel in programs for young children.

(6) Salaries. This is definitely a serious problem area. Respondents were requested to indicate the approximate monthly salary at each occupational level they employed. (Wherever part-time employees were reported, an adjustment was made to determine the monthly salary.) Table 4 presents the salary averages reported by respondents and compares these with the average salaries of recent Purdue University graduates at each educational level for CCS II and above.

TABLE 4

SALARY INFORMATION

Average Monthly Salary Comparisons: Survey Respondents With Recent Purdue Graduates at the Associate, Bachelor and Master Degree Levels

N = 101 Specialist Level	Reported Monthly Salary (Averages)	Purdue Graduates' Salaries (Averages) 3/
Child-Care Spec I* (Apprentice, asst. worker)	$310.00*	-
Child-Care Spec II (Assoc. degree or equiv.)	$445.00	$635.00
Child-Care Spec III (B.S. degree or equiv.)	$615.00	$793.00
Child-Care Spec IV (Graduate degree)	$725.00	$980.00

*Based on 176 hours work per month, the approximate hourly rate for these workers would be $1.75 per hour (this is only 10¢ more than the minimum level established by the Federal Government for covered jobs -- which include unskilled and semi-skilled personnel).

In general, reported salaries were highest in the Lafayette and Indianapolis Areas and lowest in the Southern Area.

It is apparent that college-trained people are not drawn to this endeavor by high dollar reimbursement: it is also probable that reported current job vacancies may not be due entirely to a shortage of trained personnel - but rather are due to low salaries.

(7) Needed Training Programs.

The responses to related questions indicated that two main types of programs/program assistance were needed.

First, programs -- both pre-service and in-service -- and training assistance were much needed for the CCS I level. Returns showed that more than 200 people would enroll now in non-college level training courses -- and more than 425 additional enrollees might be anticipated for the next three years. Most of the needs were reported for the Calumet, North Central, Indianapolis, and Lafayette Regions. Written comments emphasized that these programs must be local, low in cost and practical. Many respondents stated they could do their own training at the CCS I level, but they needed help, such as training guides and materials, as well as financial assistance. It was brought up quite often that the primary qualifications, especially at the CCS I level, were love of children, dedication, desire or natural inclination to be with them, and experience rather than formal education. The need for correspondence courses (free or very low cost) was mentioned by a number of respondents. (A few also stressed good physical condition and attitude as well as cleanliness.)

Advantage should be taken of the opportunities provided under the Manpower and Development Training Act. (e.g. MDTA Course #0385 for Child Day Care Center Workers.)

Second, an impressive need was reported for college level courses in child development and supporting fields; this was much more true for the undergraduate level where returns showed that more than 120 people would enroll now and about 225 more might enroll in the next three years. For graduate-level courses it was reported 42 might enroll now and 53 more during the next three years. Most of these needs were reported for the Calumet, Indianapolis and Lafayette Regions for undergraduate level courses; and in Calumet and Indianapolis for graduate level. There were numerous comments written in to the effect that knowledge or competency acquired through other than formal education/training programs should be recognized in any method of certification or registration. The need for acquiring practical experience while enrolled in formal educational programs was reiterated by many practitioners. Again, the theme that child-care required love, patience and understanding -- was repeated in discussions of formal training and education.

Caution was expressed not to over-rate the value of formal education for child-care specialists when dealing with preschool age children.

The large majority of respondents agreed with the idea of starting up a proposed child-care type of associate degree program. Seventy-seven out of the 86 who answered this question were in favor of establishing the program. Some wanted to enroll immediately... some wanted courses at night. The largest agreement came from the Calumet, Lafayette and Indianapolis Regions. A few were fearful and expressed the view that should the program be started it could become a prerequisite for CCS II certification; they believed alternative methods to determine qualification at this level were essential.

(8) Certification or Registration. This could be a problem area if not handled carefully. Only 76 of the 111 responding to the survey completed this part of the questionnaire.

Generally speaking, it was found that the higher the occupational level of the child-care specialist, the more agreement there was for certification or registration. Only 49 respondents believed the CCS I should be certified -- and almost all of these felt that determination of such qualification should be based on the recommendation of a qualified practitioner: more than half felt that experience was essential for full qualification, with 8 months being reported as the average requirement. It was recommended by many that entry level to the CCS I specialist level be largely unrestricted (i.e. as pertains to formal educational requirements); love of children, desire and experience were all listed as being of primary importance. Physical and mental fitness were also mentioned as necessary considerations.

There was more agreement for certification of the CCS II through IV levels. Completion of an approved program was recommended for the CCS III's and IV's in particular, and to a slightly lesser extent for CCS II's. Again, the need for increased experience was reported at each ascending specialist level -- but by notably fewer respondents in each case. State Board type of examination was not a popular choice, but where recommended, it was indicated as being more applicable to CCS III's and IV's. A number of comments written on the questionnaire stressed the point that some cognizance must be taken of knowledge and experience to be used in lieu of, or in conjunction with, formal educational attainments.

A national system is being considered for the Child Development Associate (CCS II). Individuals would be certified based on demonstrated competency rather than only on formal educational attainments. The certificate would be "nationally negotiable" and awarded through a national system. Candidates would be observed and evaluated by teams of consultants designated through the national system.

The problem of adequately financing training programs for child-care specialists -- and of paying adequate wages or salaries to qualified specialists -- was a matter of concern to many.

(9) Other Comments and Suggestions. Among the most frequently expressed opinions (other than in the areas discussed above) were views to the effect that studies such as this and carefully guided actions were very much needed. Child care and development were recognized as being of critical importance. The broad range, scope and quality of activities; responsibilities and qualifications; providing quality care at low cost; complexities in standardization, licensing and certification; and the various related problems being experienced were all reflected in these comments.

Concern was expressed about the quality of care -- and of personnel -- in some day care homes. Many believed that standards should be established and maintained; others felt that their love, concern, desire, and experience were of the utmost importance, and "book-learning", though important, was secondary. Financial assistance to raise the level of services and pay more highly qualified help was a common plea. Help was also needed to facilitate in-house training.

22. Recommendations.

✓(1) A Note of Caution. First, caution is advised against making far-reaching detailed policy or taking precipitous actions in pre-school age child-care matters in Indiana without coordination and joint planning of organizations and individuals having related responsibilities. The broad range in scope and quality of operations -- from a "baby-sitter" and "foster mother" in a day care home -- to a well-planned, modern and well-equipped child-care center operated by professionals for child education and development --- must be recognized and coped with. Many people must be educated to establishing standards, accepting defined occupations and qualifications arranged in a child-care specialist career ladder, recognizing the values of licensure and certification, and in upgrading their services and qualifications. It is recommended that there continue to be broad involvement, good communications, and mutual assistance and planning between all persons and organizations involved in preschool age child-care matters, to the maximum extent feasible.* For example, working with Head Start, Work Incentive Program, and the Community Coordinating Child Care (4-C) programs is recommended to improve and expand the quality and scope of programs and obtain optimum results from resources expended.

State efforts should be consistent with and support National guidelines and programs (e.g. the National Association for the Education of Young Children, and the Office of Child Development -- Regional & National -- and the Children's Bureau, U. S. Department of H.E.W.).

✓(2) Further Study Needed of Day Care Homes.
There is a need for more study of child day care homes and operations in Indiana (as well as for the Nation). The nature, objectives and results of this particular study, and recognition of the poor response from day care homes, should be considerations in planning further research and studies. Utilizing a variety of talents of those involved (such as the advisory committee used in this study) is highly recommended.

*It is essential that State government agencies plan and operate in a coordinated fashion in child-care matters, (e.g. Dept. of Public Welfare, Dept. of Public Instruction, State Board of Health, State Legislature Committee, the Commission for Higher Education, etc.) Appropriate associations, civic and religious groups, business, labor, and industry representatives must also be involved. (See paragraphs (6) (e) and (f) on page 44.)

✓ (3) Child-Care Specialist I; Training and Financial Assistance. In view of current job vacancies and future requirements for Child-Care Specialist (CCS) I, (Non-degree worker or apprentice), it is recommended that financial and training assistance, and information services be provided throughout the state. Training program guides, instructional and related materials should be developed for both "in-house" use as well as for programs established to serve the community. Evening courses are also needed. Instructors and coordinators should be provided to help establish, guide, and where necessary, to actually conduct such activities. Recognition should be given to approved programs (such as an "accreditation certificate") as well as to those completing their training.--- Others who are considered to be fully qualified as CCS I specialists through examination and/or interview should also receive recognition. An "official" certificate and an appropriate cloth badge or patch are suggested for those who qualify.

✓ (4) Child-Care Specialists II and Higher; Education, Recognition and Placement. Recognizing the current and projected needs for professionals in child development and child-care activities, it is recommended that:

(a) An Associate Degree program in Child-Care be developed and offered for the educational preparation of CCS II's (Child Development Associate). It is suggested that the first such program be developed at Purdue University's Lafayette Campus, followed by programs offered in Indianapolis and Calumet. Other colleges and universities in Indiana should be encouraged to also develop associate degree programs in child-care. The suggested objectives and guidelines used in this study (see Attachment II of survey) and the guidelines developed by eight national organizations concerned with children (see Appendix II of this report) should be applied. The program should also be an integral part of the Office of Child Development (HEW) Child Development Associate system. There should be opportunities for students to observe actual operations and acquire practical experience under supervision during the program. This program should provide a stepping stone for the upward career mobility of CCS I's, as well as opportunities for women of all ages to acquire the knowledge and qualifications as a CCS II. It should be possible for qualified graduates of this associate degree to progress

to the baccalaureate level (CCS III) if desired. Again, it is recommended that formal recognition be given to those who qualify as a CCS II.

The definitions, designation, training and education, and determination of competency of the Child Development Associate (CCS II) should be consistent with the program features and objectives as delineated by the Office of Child Development of the U. S. Dept. of H.E.W. After the associate degree program is in operation, it is recommended that supervised internship and work-study programs be developed and implemented for preparation and upgrading of Child Development Associates.

(b) Efforts continue in conducting and in the further development of baccalaureate and graduate level courses and programs in child-care and development. Subjects concerning organization, administration and training are recommended for inclusion in the curriculum for developing professionals in this field. Again, opportunities should be provided for students to observe actual operations and acquire practical experiences under supervision. These college-level courses are particularly needed in the Calumet, Indianapolis and Lafayette Regions.

It is important to provide opportunities for those now enrolled in - or having completed studies in - other fields or disciplines, to transfer into child-care or child development related programs. For example, the job market for most elementary education teachers is very poor with rather discouraging future prospects: this may be a natural source for potential professionals in preschool age child-care and development.

(c) It is also suggested that local work-shops, seminars, and/or information exchange meetings be held locally. Properly planned, these can become excellent means of providing communication channels and for upgrading personnel and operations.

(d) An employment information system be established where both job opportunities and qualifications of persons seeking employment in child-care activities might be posted -- e.g. a sort of clearinghouse, particularly for professionals.

NOTE: The literature and data from authoritative sources show the requirements for trained child-care specialists and the need for good training/educational programs are National in scope.

✓(5) Salaries and Costs. The problem of low salaries must be recognized and dealt with in order to hold (and to attract) qualified people in child-care activities. Also, the need exists to keep costs down yet upgrade some child-care services and operations. Inasmuch as there is a limit to the amount that many in need of child care services can pay, it is essential for health and service industries, community and religious groups and clubs, business, manufacturing industry and labor unions, Chambers of Commerce, and local, State and Federal governments, to provide financial as well as other assistance. It is also necessary to inform students entering into child-care/development type programs that there might well be low salaries upon graduation.

NOTE: There are on-going efforts in the Federal Government to pass child-care legislation which would subsidize child-care for low-income families as well as provide funds for training. These developments must be closely observed and capitalized upon.

✓(6) Certification and Registration. With regard to certification and registration matters, it is recommended that:

(a) The qualifications and standards for each child-care specialist level be announced formally by State officials.

(b) Recognized child-care program directors, officials, and qualified center or licensed home practitioners be identified and authorized to determine and authenticate the qualifications and prior experience of CCS I level specialists; appropriate certificate and emblem to be awarded accordingly.

(c) CCS II and III specialists be required to complete recognized (approved or accredited) training or educational programs, or by examination and/or interview by a State authorized official, demonstrate an acceptable equivalency level. Actual experience or practice should also be required and authenticated; appropriate certificate and emblem to be awarded accordingly. The CCS II (Child Development Associate) certification standards and procedures should be consistent with the national program, and if possible, an integral part of the related national system.

SPECIAL NOTE: At the time this report was being duplicated the following announcement was made in Higher Education and National Affairs, dated 14 July 1972.[19]

> New Profession Created for Care of Young Children. The U. S. Office of Education announced this week initiation of a new profession for individuals interested in working with and caring for young children. Edward Zigler, director of the Office of Child Development, said the new profession, called Child Development Associate, will be launched with an initial grant of $802,000 to a consortium of individuals and representatives of national organizations concerned with quality education for young people. The consortium was developed by a planning group consisting of representatiives from the American Association of Elementary Kindergarten-Nursery Educators, Association for Childhood Education International, and the National Association for the Education of Young Children. The consortium will develop and implement means of assessing the competence of a CDA candidate, and issue the final credential to the qualified CDAs.

(d) CCS IV specialists be required to complete an appropriate graduate level degree and have acquired the specified experience for certification as confirmed by a designated State authorized official.

(e) The Indiana State Welfare Department is now responsible for the setting of standards and licensing of day care centers and day care homes. It is recommended that these efforts be supported and expanded. It is suggested that the certification of child-care specialists be made the responsibility of the State Welfare Department, working in close liaison with the departments of health and public instruction.

(f) Since child care embraces the areas of welfare, education, physical and mental health, and social services, it is recommended that a study be made as to the feasibility of establishing a new State agency, (i.e. Office of Child Development) to assume responsibility for State-level child-care activities such as setting standards, licensing, certification and supervision.

✓ (7) Raising Quality Level of Child-Care.

It is recommended that an effort be launched to raise the quality of child-care services in Indiana. The number of day care homes that are licensed should be increased -- through the provision of advice, encouragement, and financial and training assistance. Also, the certification of operating specialists should be started as soon as policy, standards and procedures are developed. Care must be exercised to encourage and facilitate such licensure and certification so a cooperative and positive situation evolves throughout the State. These plans and actions should be consistent with National standards and systems. Financial assistance and professional guidance should be made available. Appropriate public announcements should be made or authorized concerning these efforts. Visible evidence should be provided (e.g. an official framed document or plaque) for public display in approved (licensed) homes and centers, and special emblems or shoulder patches should be made available to certified child-care specialists.

SELECTED BIBLIOGRAPHY

1. The Report of the Sub-committee on Training of Personnel; State of Indiana, Community Coordinating Child Care (4-C). 1971.

2. Included in News of Iowa State, Volume 24:6, July-August 1972, published by Iowa State University, Ames, Iowa for alumni and parents of students.

3. "Daytime Programs for Children", published in YOUNG CHILDREN, September, 1967, pp. 345-347.

4. Graduates' Placement Reports. 1972, Purdue University Placement Service, Lafayette, Indiana 47907.

5. "A Timid Giant Grows Bolder" by Bettye M. Caldwell, DAY CARE FEATURE, as published in Saturday Review, February 20, 1971. pp. 47-65

6. Taken From: Day Care in America; by Irving Lazer, Ph.D; Director, Child Development Appalachian Regional Commission; Washington, D.C.. Mae E. Rosenberg; Education Policy Research Center; Stanford Research Institute; Menlo Park, California, 1970, p. 34.

7. Volume I: "Findings" from A Study in Child-Care, Sponsored by The Office of Economic Opportunity; U.S. Department of Health, Education, and Welfare; pp. 3-4.

8. "With More Working Mothers...Will Day Care Become A Must?" Industry Week, December 28, 1970; pp. 11-13.

9. "Day Care Services: Industry's Involvement", Bulletin 296, Women's Bureau, U.S. Department of Labor 1971; pp. 1-33.

10. "A New Child-Care Profession: The Child Development Associate". by Dr. Edward Zigler, Director of the Office of Child Development and Chief of the Childrens Bureau, Dept. of Health, Education and Welfare. Published in the December 1971 issue of YOUNG CHILDREN, pp. 71-74.

11. Hearings Before the Senate Committee on Finance on H.R. 1; 22 September 1971, pp. 218-223.

12. These studies are: (1) Child-Care Arrangements of Working Mothers in the United States (Children's Bureau Publication No. 461-1968), compiled by the U.S. Department of Health, Education, and Welfare's Children's Bureau and the U.S. Dept. of Labor's Women's Bureau; (2) Findings of the 1969 AFDC Study, NCSS Report AFDC -- 3 (1969), (U.S. Dept. of Health, Education, and Welfare, National Center for Social Studies); and Child-Care Arrangements of AFDC Recipients Under the Work Incentive Program, Quarter Ended September 30, 1970 (NCSS Report E--4, 9/30/70). (3) See also David B. Eppley, "The AFDC Family in the 1960's" Welfare in Review, September-October 1970, pp. 8-16; and (4) two studies of the Center for Human Resources Research of the Ohio State University, Columbus, Ohio: Dual Careers: A Longitudinal Study of Labor Market Experience of Women, Volume I, May 1970, pp. 121-126 (also issued by the U.S. Dept. of Labor's Manpower Administration as Manpower Research Monograph No. 21,1970); and Years for Decision: A Longitudinal Study of Educational and Labor Market Experience of Young Women, Volume I, Feb. 1971, pp. 132-140 (to be issued as Manpower Research Monograph No. 24).

13. Children of Women in the Labor Force, March, 1970, Special Labor Force Report 134; U.S. Department of Labor, Bureau of Labor Statistics, 1971. pp. 24-25

14. The U.S. Department of Labor's Women's Bureau has published several useful summaries on day care services. For example, see Day Care Facts, WB--70--213, May 1970.

15. "Welfare: America's No. 1 Problem", Interview with California's Governor Ronald Reagan, as published in U.S. NEWS & WORLD REPORT, March 1, 1971, pp. 36-40.

16. "Day Care Center Staff Need Set at 10 Million", article by Mr. Jerry Moskal of the Washington Bureau, as reported in the Journal and Courier Newspaper, Lafayette - West Lafayette, Indiana, on Friday, June 18, 1971. p. 3.. Also,
Letter from the Hon. William D. Ford, Member of Congress (Education and Labor Committees) dated June 29, 1971. Also,
"Review of Federal Manpower and Day Care Legislation and Programs as Potential Sources of Funding for the Training of Day Care Personnel", May 1971; Research Staff, Educational Systems Division, UEC, Inc. 1501 Broadway, New York, N.Y. 10036.

17. Source: U.S. Dept. of Health, Education, and Welfare, Office of Child Development (unpublished information). Taken from: Day Care in America; Table 1, p. 21 and Table 2, p. 23; 1970.

18. Background Paper on Day Care and Preschool Services: Trends in the Nineteen-Sixties and Issues for the Nineteen-Seventies by Ronald K. Parker and Jane Knitzer on behalf of the Office of Child Development, Department of Health, Education, and Welfare for the 1970 White House Conference on Children and Youth.

19. "New Profession Created for Care of Young Children". Higher Education and National Affairs, American Council on Education, One Dupont Circle, Washington D.C., 20036. Vol. XXI, No. 27; July 14, 1972, p. 6.

APPENDIX I

PURDUE UNIVERSITY
DEPARTMENT OF CHILD DEVELOPMENT AND FAMILY LIFE
LAFAYETTE, INDIANA 47907

1 April 1972

Sample Copy of Survey Package
Includes:
Letter of Transmittal, Survey Explanation,
Questionnaire, Child Care Specialist Career Ladder (Attach 1), and
Objectives and Guidelines for
Associate Degree Program in Child Care (Attach II)

TO: Friends of Day Care in Indiana
FROM: State Department of Public Welfare
State 4-C Committee
Department of Child Development and Family Life and
Office of Manpower Studies at Purdue University

We ask for your advice so that we may serve you better. Specifically, we need to know what kinds of training and educational programs -- and the possible number of new child care specialists -- you believe are needed on your staff.

If you will complete and return the attached questionnaire we will be able to include your ideas and requirements for training present and new child care people in Indiana. Your response will be strictly confidential, with the information incorporated with other replies in a manner so it cannot be identified separately.

This enclosed questionnaire is not complicated and it will take only a little time to answer. Please return the completed questionnaire in the enclosed envelope as soon as you can conveniently do so. The results of the study will be published and made available to all who are interested.

Your cooperation is appreciated very much. Working together, better training programs will be designed and offered that should help us all -- and the children in our care.

Sincerely yours,

Mary P. Endres

Mary P. Endres, Professor
Early Childhood Education

ATTACHMENTS

This questionnaire is in four parts:

PART I MANPOWER NEEDS

The first part asks for the number of child care specialists and jobs you now have at each of four occupational levels -- and how many you may need in the next three years. The four levels are the ones being applied in the Community Coordinating Child Care (4-C) program as follows:

Child Care Specialist I	Apprentice/assistant worker
Child Care Specialist II	Associate (2yr.) Degree level worker*
Child Care Specialist III	B.S. (4 yr.) Degree level worker
Child Care Specialist IV	Graduate Degree level worker

* Recommended title "Child Development Associate", by Office of Child Development, United States Department of Health, Education, and Welfare.

The four levels are described in Attachment I.

PART II NEEDED TRAINING PROGRAMS

Part II concerns the kinds of training programs you believe are needed such as:

Job-entry (for initial employment in child care work),
In-service training (for those now working as child care specialists),
Re-training (i.e. for elementary teachers or older persons),
Up-grade training (i.e. CCS I to II, to III, then IV).

PART III PROPOSED CHILD CARE ASSOCIATE DEGREE PROGRAM
(2 yr. college level)

Note: At the present time, there are a number of bachelors and graduate level degree programs in Child Development and other appropriate academic fields. However, there is no 2 year college level program where a person can receive an appropriate associate degree and be job-ready, or later proceed to the baccalaureate or higher level, if desired.

Part III of the questionnaire asks your opinions about the need for this proposed associate degree program and asks for any suggestions you may have. (See Attachment II for the proposed curriculum outline.)

PART IV CERTIFICATION OR REGISTRATION OF CHILD CARE WORKERS

Part IV asks if you believe any or all of these child care specialists should be examined, certified or registered? If so, which method(s) should be applied; i.e., State Board type of examination, graduate of accredited training program (or having equivalent knowledge), recommendation of a recognized professional practitioner, minimum experience (e.g. number of months), or other?

(Please fill out and return the one sheet questionnaire only)

CHILD CARE PERSONNEL
Information Survey

Please fill out and return to:
Prof. J. P. Lisack,
Purdue University, SCC-A
Lafayette, Indiana 47907

Your name _____

Your title _____

Address _____

_____

Please check type of Activity:
Child care center ____ Nursery ____
Child care home ____ 4 C ____
Physical or mental handicap ____
Head Start _____
Other _____
(Please identify)

Part I Manpower

Please fill in each of the blank spaces, entering a zero or "none", if necessary. (The descriptions of each of these child care specialist occupational levels are presented in attachment 1).

Specialist Level	Number you now have	Addit'l number you need now*	Number you estimate are needed in the next 3 years**	Approximate monthly salary
Child Care Spec I (Apprentice, asst. worker)				
Child Care Spec II (Assoc. degree or equiv.)				
Child Care Spec III (B.S. Degree or equiv.)				
Child Care Spec IV (Graduate Degree)				

*To fill present vacancies
** Future vacancies due to attrition and new jobs (e.g. expansion)

Comments: _____

_____

Part II Needed Training Programs

Please indicate the number of people from your activity who might enroll in the programs below:

Type of training	Number who would enroll now	Additional number needing training in next 3 years
Non-college level training for CCS I (apprentice/assistant)		
College-level training (Undergrad.) (for CCS II or III (Assoc. or B.S.)		
Graduate-level courses (M.S., Ph.D.) (for CCS IV or others)		

Comments: _____

_____

(over)

PART III PROPOSED CHILD CARE ASSOCIATE DEGREE PROGRAM

Do you agree with the idea of starting up the proposed associate degree program (2 yr. college level) for child care specialists? (For description of program, see Attachment II.) YES_____ NO_____
If NO, why not?_____

Please write in any changes or suggestions you may have about the program:

PART IV CERTIFICATION OR REGISTRATION

Do you believe any of these child care specialists should be certified or registered? If YES, please check the method(s) you believe are most applicable or identify any alternative method you recommend for each level.

Occupational Level	Should be certified-or registered YES	NO	Method(s) Recommended: State Board type examination	Graduate of approved program	Recommended by qualified practitioner	Experience (number of months)	Some other method*
Child Care Spec I							
Child Care Spec II							
Child Care Spec III							
Child Care Spec IV							

*Please explain:_____

Other comments or suggestions:_____

ATTACHMENT I

CHILD CARE SPECIALIST CAREER LADDER[1]

We propose a career opportunity system to provide care and protection for all Indiana children in need. The particular system--a Child Care Career Ladder--includes four levels ranging from the less formally educated Child Care Specialist I - through the broadly educated Child Care Specialist IV, as follows:

Child Care Specialist I - non-degree apprentice/assistant worker

Child Care Specialist II - associate degree worker

Child Care Specialist III - B.S. degree worker

Child Care Specialist IV - M.S. degree worker

Dr. Edward Ziegler, Director of the Office of Child Development, HEW, has announced the development of a new profession of child care worker - the Child Development Associate. This document describes a program to implement that new program.

Lower rank Child Care Specialists can advance up the career ladder within and across ranks as they complete courses and/or accrue on-the-job training and experience. Particular attention will be paid to, and particular provisions made for, the highly motivated CCS I who may be unable to or disinclined to seek the formal schooling necessary to achieve the CCS II level. Each rank will have comparable distinction of label and salary to recognize and reward particularly high level contributions of certain workers. Suggested labels: CCS IA, CCS IB, CCS IC; CCS IIA, CCS IIB, CCS IIC.

Because Child Care Specialists focus on maintaining and improving adult-child relations, they need to understand critical stages in human development and the complex demands of interpersonal interaction in normal life situations. Child Care Specialists contribute to a well planned, unified, and consistent program providing the child with nurturance and education designed to help him cope with everyday living. Child Care specialists provide hour-by-hour care for the child emotionally disturbed or physically ill.

The following recommendations are important, though need not be rigidly followed:

1. Study the normal child before the abnormal child.
2. Study the younger child before the older child.
3. Teach practical and theoretical dimensions concurrently.
4. Teach emotional, intellectual, biological and social dimensions concurrently.

Many colleges and universities are now offering programs leading to the B.S. and M.S. degrees for CCS III and IV levels. This document, therefore. explains the program for CCS I and II, including the job duties, qualifications, personal qualities, suggested placements and training for each rank.

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[1] Materials from the REPORT OF SUB-COMMITTEE ON TRAINING OF PERSONNEL, STATE OF INDIANA 4-C COMMITTEE have been liberally drawn upon in the preparation of this document.

CHILD CARE SPECIALIST I (NON-DEGREE APPRENTICE/ASSISTANT WORKER)

Job Duties

Child Care Specialist I is an apprentice-assistant and always works under the supervision of the direct practitioner.

He[1] is never in sole charge of any group.[2] He provides individual and group attention under supervision and after some in-service training. This should be particularly true when the children are handicapped in any way.

1. Cares for the physical needs of children, helping with food preparation and feeding, assisting with bedding and arising, dressing and undressing.

2. Guides children at play and on field trips and may take some children or families to appointments.

3. Helps the children and other adults in keeping an orderly and attractive room, doing minor emergency housekeeping chores whenever needed, helping to remove effects of completed activities which may interfere with traffic or with other projects, and helping to maintain play equipment.

4. Like other adults, serves as a model for the children.

5. Accepts and uses supervision, attends staff meetings and in-service classes, and functions professionally as a staff member.

Professional Qualifications

1. Desire and ability to learn more about the development of children in order to be good child-carers.

2. Interest in working in a child care program in a developmental rather than custodial manner.

3. Appropriate experience as a volunteer in children's clubs, at school, or in hospital wards; professional service providing child care such as nurse's aide, nutritionist, assistant in an educational program.

4. High school diploma or equivalent such as General Education Diploma preferred. Under unusual circumstances, another equivalent might be outstanding service in a child caring position for an extended period.

Personal Qualities

1. Physical health and stamina; ability to be mobile and to do a great deal of standing and walking. There are circumstances where physically handicapped may serve also.

2. Mental and emotional stability; the ability to endure emotional stress and abuse from children without becoming upset or vindictive; the ability to be quiet.

3. Ability to relate to authority in a healthy manner; flexibility to adjust personal performance appropriately to the needs of the child and the circumstances.

4. Respect for human beings, especially children; self-respect; health motivation for working with children.

5. Ability to be quiet; to listen.

6. Spontaneous warmth and enthusiasm toward children, their interests and healthy activities, their level of fun and jokes.

7. Realistic and honest approach to life.

[1]In this report, "he" refers to both female and male child care specialists.

[2]This is not be interpreted that the CCS I should not be alone with a group.

Suggested Placements

1. Apprentice-assistant teacher or community worker in child care centers, kindergartens, nurseries.

2. Cooks in child care centers and in any program where children are cared for or receive treatment.

3. Apprentice-assistant in children's hospitals, psychiatric wards, and pediatric wards; in group homes, half-way houses, and shelters; in children's camps.

In-Service Training

The CCS I will have a minimum of one full week in orientation to the day care center or the agency to which he is assigned. He will be given a description of his job with the understanding that there will be periodic evaluation and opportunities for advancement in rank.

Recommended topics for orientation period:

Philosophy of the child care agency
Roles and capabilities of staff members
Team relationships (including structure for dispelling misunderstandings and for registering legitimate complaints)
Professionalism
Carrying out the educational program
Health and safety
Discipline and self control

From the beginning the CCS I receives in-service training either on-the-job or by an appropriate outside agency. The in-service program will stress child growth, how the CCS I can use his efforts to enhance growth; the importance of healthy child-adult relations; and constructive control. The in-service education will also include nutrition, first aid, safety, and simple nursing. This training will enable the CCS I to carry out his job duties and to progress to the higher within-rank levels, or to CCS II.

* * * * *

CHILD CARE SPECIALIST II (ASSOCIATE DEGREE OR EQUIVALENT)

Job Duties

The Child Care Specialist II is the direct practitioner, responsible for care of the child in groups or home environment. His is the burden of minute-to-minute, hour-to-hour, day-to-day contact with children, usually within the context of a group, but often on a one-to-one basis. He greets the children in the morning, puts them to bed, directs their education, serves them meals, plays with them, takes them on outings. Within the agency he often becomes the significant person for many children. He must be available to the child, sensitive, and free from personal and agency interferences which might hinder positive interactions or responses.

The qualified CCS II should be able to plan and carry out, independently or cooperatively, a comprehensive daily program for children in line with the long term goals of the agency. Depending on the purpose of the agency and the needs of the children, CCS II may be responsible for duties in the following categories: 1) developmental and therapeutic activities, 2) educational programs, 3) house-parent functions, and 4) clinical child care.

Depending upon the institutional set-up and fluctuations of children's needs, the duties of the above categories may overlap. At all times, required duties grow out of professional standards of child care and child care functions: nurturance; education for health; realistic life situations; and when necessary, treatment.

The Child Care Specialist II:

1. Maintains surveillance over a designated number of children, protecting, guiding, supervising.

2. Remains alert to the nature of the child's immediate needs and provides suitable nurturance as the situation may call for; feeding, bedding down or taking up, toileting, reassuring, rocking, explaining, reprimanding, listening to or observing, being silent, firm, permissive, intrusive or unobtrusive, doing for or with, making decisions or allowing the child to, providing activity, or being friend, playmate or caring adult.

3. Uses himself effectively and consistently in different roles for different children, aware of developmental needs at different levels, and of the sustenance that can be embodied in simple nurturing tasks by the adult's manner and attitude.

4. Interprets nurturance as cherishing as well as nourishing and becomes an integral part of relationships with children in order that the child develops trust and ego-strength and tests out new horizons of growth.

5. Creates opportunities for, stimulates interest in and organizes developmental, remedial, and cathartic play, arts, crafts, trips and educational activities of all kinds as prescriptive programs; uses activity diagnostically to help gain insight into the child in his every-day living; remains aware that over-stimulation and under-stimulation alike can be detrimental.

6. Stimulates the child's awareness of himself, his feelings and behavior, his goals and long-term aspirations; communicates to the child a sense of personal worthiness including his appearance, sex, and cultural background.

7. Protects the child from depersonalizing qualities of rigid, non-child oriented institutional care; creates conditions allowing the child to interact positively with his environment; stimulates meaningful group life through interactions in projects and activities.

8. Uses reprimanding justly, appropriately, and flexibly in setting limits and in correcting, so that there is a dialogue between himself, the individual child and the group rather than a harsh, unreasoning enforcement of rules.

9. Plans tasks for children according to their abilities as part of an experiential program which provides for gradual development of physical, intellectual, social, and psychological growth.

10. Provides personal care, seeing to children's simple needs and comforts, knowing the value of these tasks when performed with care and their detrimental effects when not; prepares and serves snacks and meals, joining and assisting the children at the table; makes bedtime and rising happy hours; toilet-trains without rancare or punitiveness; helps children to use autonomy acceptably and to socialize constructively.

11. Educates children to self-care so children will learn to do for themselves and enjoy it; gives individual assistance where physical handicap, mental retardation, and personality distress may limit performance.

12. Keeps the children's rooms attractive and inviting and encourages children to share in the upkeep; sees to the care of equipment and safety of conditions; may be responsible for purchases and repairs; does janitorial chores in emergencies to permit the children's program to flow unhampered.

13. Makes observations; reports and records his impressions of the child, his needs, growth, interests, and behavior; does the same for the group as a whole.

14. Serves as a member of an agency team, contributing and receiving knowledge of children, and sharing in professional responsibilities.

Professional Qualifications:

Same as those for Child Care Specialist I, plus:

1. Certificate from long-term non-degree child care program or Associate degree in child care (or equivalent to qualify).

2. Broad understanding of the concepts of child development; healthful adult-child relationships; professional child care practice.

3. Ability to contribute to staff relationships, to learn from other staff members, and to contribute to a total positive atmosphere within the agency.

4. Skill in observing and reporting.

5. Willingness to accept supervision.

6. Self-reliance.

Personal Qualifications:

Same as CCS I, but in degrees reflecting experience and education, plus:

1. Ability to work effectively with and give support to CCS I's.

Suggested Placements:

1. Child care centers, kindergartens, nurseries.

2. Public and private school program; resource rooms and adjustment classes; special classes for mentally retarded, physically handicapped and disturbed children.

3. Residential and/or day care treatment centers for children with personality disorders and physical or mental handicaps.

4. Private homes, family stress situations or after-care.

5. Community health programs, health clinics.

6. Training schools, diagnostic centers, detention quarters for delinquents.

7. Shelters for dependent and neglected children.

8. Children's psychiatric wards.

9. Children's hospitals and pediatric wards in general hospitals.

10. Workshops.

11. Group homes, half-way houses, and shelters for unwed mothers.

12. Educational, therapeutic, and recreational camps.

ATTACHMENT II

Associate of Applied Science Degree in Child Care

The primary objective of this Associate of Applied Science (AAS) program is to prepare adults up to the associate degree in order that they will be capable of devising and implementing programs of competent child care appropriate to the needs of families in the communities served.

Because courses assumed to be part of general education are included along with courses in child care, a person holding an AAS degree may continue his education by pursuing a Bachelor of Science degree with a major in human development. Part-time or special students who do not have a degree objective may take courses as desired.

The following serve as a guidelines to planning the two-year program:

- One semester basic course in Psychology.

- One semester basic course in Sociology.

- Four semesters of Child Development and Child Care, including both theory and practicum. Content should include theories of developmental stages, the range of variance in behavioral patterns and rates of development in normal children from birth to adolescence with special emphasis on the first five years. Some content on the needs of typical children should be included. There can also be content on what it means to grow up in families which are racially and enchnically different.

  Practicum would place emphasis upon techniques for caring for children in groups, the relationship between the child care specialist and the child, the position of child care specialist in relation to parents, and achieving a balance between nutrition, mental health, physical safety, and developmental needs (physical, cognitive, social, and affective).

  One semester course in child welfare services, policies and laws with emphasis upon community and state services available currently.

- One semester course in the family with emphasis upon variations in patterns and new developments in knowledge of family interaction. It is essential that possible students prejudices regarding working mothers and/or one parent families be dealt with to prevent negative effects upon children and upon the parent-child care specialist relationship.

  One course in nutrition, physiology, health, safety, and perhaps, simple food preparation.

- General courses in English composition, communications, biology, and mathematics plus electives to be chosen by the student.

NOTE: This program is designed to meet the educational requirements of the Child Care Specialist II.

APPENDIX II

DAYTIME PROGRAMS FOR CHILDREN

Extracted from September, 1967 issue of Young Children , pages 345, 346, 347.

The following guidelines for daytime programs for children were developed jointly by representatives of the following organizations:

American Association of University Women
Association for Childhood Education International
National Association for the Education of Young Children
National Committee for the Day Care of Children, Inc.
National Committee for Support of Public Schools
National Congress of Parents and Teachers
National Education Association
Department of Elementary-Kindergarten-Nursery Education, NEA

All daytime programs for children promote specific goals and foster a quality of living that provides for total and continuous growth. They should:

1. Meet the basic needs of children for:

   -Good health and physical development;
   -Attention, acceptance and affection;
   -Opportunities to experience success and to test their mental, physical and social powers;
   -Self-identity and a sense of competence and worth;
   -Security of gentle discipline;
   -Relations with adults and children that recognize individual rights and those of others;
   -Respect of adults and children.

2. Foster the unique abilities and meet the individual needs of each child.

3. Use related knowledge from all professions and resources of the community in developing programs for children and their families.

4. Provide adequate and appropriate adult guidance and health, education and welfare services for the child to be:

   -Physically and mentally healthy;
   -Increasingly skillful in using language and understanding concepts;
   -Observant and attentive;
   -Responsible, self-directed and self-disciplined.
   -Able to perceive and cope with problems.

5. Help children feel at ease about being away from home and able to accept involvement with adults.

6. Strengthen family ties and, through participation in the program, to help parents better understand their children.

7. Develop between the child and his family and the community, responsible attitudes toward each other.

Programs will differ but certain conditions are fundamental to the attainment of the above goals. Fundamental criteria are:

1. The home is recognized as the base for the child; the program supplements.
2. Responsible sponsorship for the program is assured.
3. Staff is educationally qualified, experienced and adequate in number.
4. The unique responsibilities of the family, the staff and the community agencies are defined.
5. Licensing and accreditation require supervision to ensure quality of program, adequate preparation of personnel and comprehensive health and safety standards of the facilities.
6. A quality program includes health, education and welfare components.
7. Findings of research studies are utilized in planning, organizing and directing the program.
8. Funds are made available to cover essential services.

Because of the variety of child needs, program philosophies, and ways of working, rigidity in the direction of a stereotype for all programs is not desirable. Nevertheless, certain basic elements are essential to every daytime program for children, three through five years of age:

1. The environment invites and nurtures the child's joy in discovery and excitement about learning and knowledge by providing:

   -Spacious and cheerful physical surroundings which are flexible, safe and hygienic; and allow for each child at least 50 square feet for indoor, and 100 square feet for outdoor work and play.

   -Varied equipment and materials for outdoor and indoor play that encourage dramatic play and creativity, and invite learning by discovery, such as: paint, books, clay, magnets, wheeled toys, records, wood, dress-up clothes, paper, puzzles, blocks, apparatus for active play, rhythm and music instruments, water, sand and earth, animals and plants.

   -Opportunities for the child to discover similarities he shares with other children and to become aware of the richness of differences.

   -Group living which facilitates the child's social growth and adjustment: learning his own rights and how and when to assert them and understanding the rights and feelings of others.

   -Freedom and administrative support to the teacher to seek, create and test new ideas.

2. A harmoniously working staff includes persons who are physically and emotionally healthy.

   -A teacher who recognizes and respects the individual child's uniqueness and levels of development, and is aware of the impact of his personality on each child. His broad liberal education includes professional preparation in early childhood education, child psychology, human growth and development, nutrition, mental hygiene, curriculum planning, parent education, and family and community relations.

   -Professional and service staff members who welcome and respect parents as individuals and accept their feelings toward their child; encourage parents to observe and talk things over and participate in the program. They work with parents supportively helping them to gain insights into their child's growth and learning and to be objective in appraisal of their child.

-Sufficient staff to assure a capable adult present at all times with a pupil-teacher ratio not to exceed the following:

age 3 years--10 to 12 children and 1 teacher and non-professional helpers.
age 4 years--12 to 15 children and 1 teacher and non-professional helpers.
age 5 years--15 to 20 children and 1 teacher and non-professional helpers.

-Readily available help and guidance of a pediatrician, a psychologist, a social worker and a consultant in early childhood education.

-Established working relationships with all appropriate community services including health, education and welfare agencies.

3. The program is geared to the individual child and includes:

-Confidential and comprehensive cumulative records for each child.

-Conditions that are essential to optimum health and physical growth: rest, snacks, and balanced meals if the program is more than three hours long; daily health checks; first aid; and periodic medical examinations at least once a year with follow-up care as necessary.

-A planned but flexible and informal curriculum that includes sensory, creative and intellectual experiences in music, art, language and literature, science and mathematics, and social studies and opportunities for the child to talk freely, thus developing facility in the use of language.

-Experiences designed for the child's level of development so that he can gain feelings of mastery, success and adequacy.

-Utilization of past experiences to afford continuing clarification, refinement and expansion of concepts.

-Freedom to move from group activities to solitary ones, from rigorous physical to passive, quiet activities.

APPENDIX III

SAMPLE COMMENTS OR SUGGESTIONS MADE BY SURVEY RESPONDENTS

We need more and better homes for welfare children where they love children not just for the money they get each month. See that the children get better food and care. Need social workers to check on the home from time to time.

Think all people that run day care should be recognized by some agency. At present I'm interviewed by case workers from Welfare Department and have been examined by State Fire Marshall. There are a lot of people caring for children that are not registered by any source. I've had 13 years experience in my present self-employment.

I believe that qualifications of Spec II, III and IV should be determined by the methods I checked, I think on-the-job training would be beneficial to all.

Since nursing is going toward the trend of an associate degree as well as the 4 year, I believe the associate degree worker in the child care career would be good. Because we have an overflow of social workers, physical education majors and teachers, and they have to major in something to get them job ready, they should be given the chance to study child care and get a related degree.

I feel there is an urgent need for re-training people who had planned to teach in elementary and secondary schools, or even people who have degrees in other fields. For example, we now have a staff member with a degree in Spanish No child care/development or education courses, but she has discovered a real affinity to working with pre-schoolers. She has the naturel "feel" for such work but no really pertinent training. It would be a pity for her to have to go back to school for a "canned" associate degree - when she gains so much by observation and personal study. Some means of accommodating people like this must be found.

Our teachers are all experienced in being mothers - Sunday school teachers, scout leaders, nursing training - they are all interested in the children and in the school. They work at it. This is more important to us than a degree. At $65 per month who can afford degrees?

I think there should be some kind of method to establish the proper care a foster mother should take to care for children.

Perhaps I do not understand the question about degrees. If this applies to day care in one's own home, I disapprove. However, someone in an institution should have formal education inclined toward the child-health-family, etc. On the other hand, I feel I am very qualified through self training and observance and I have no formal training - so a state board exam might be all I'd need.

It is assumed that an evaluation instrument dealing with teacher competencies will be employed. Certification will mean very little to many if no financial upgrading or help is possible.

I suggest that this program be made available to us at IUPUI as soon as approved. We have had requests for this type of program for months.

If SDPW would employ such persons they would fall within merit system, therefore subject to appointment by passing an examination.

I think you have done planning in an area that there is a need for. I do not feel that this area should be closed to non-graduates of college, but they do need specialized training for their work with children. I am very much interested in this field and will be going to a Methodist Leadership Seminar in September to become certified Lab Teacher. (Helping others to become specialized trainees in this area.) I have a BS & MS from IU in Elementary Education and have become extremely interested in Early Childhood Education. We have also developed some material through our company for this age child and have some new items for this age in the next 2 months.

I strongly am against state control over child rea ing and fear EXCESSIVE emphasis on schooling and especially certification, licensing, etc. which I am afraid leads to too much government management of adult-child relationships. I do, however, feel that any child-centered organization should have and benefits from educational and training programs for all staff members.

When I was just out of school (MS & BS) and worked in a large nursery, I made many terrible mistakes. First, the lead instructor-owner gave me no guidance or suggestions, nor supervision. She was working on BA degree and mother of four. Second, the training I did have (mostly books) didn't seem to relate to the actual children. Your program MUST help people who don't have children of their own relate the books and training to the diversified children in an actual nursery situation. Living with children has taught me more than all the books, babysitting, and nursery work I ever did. Now -- after having 3 children -- I can read a book or article and relate it to the actual situation which arises with a child.

If the assistant workers are trained by the supervisors -- then one is sure they will know how to work with the kids. Assistants often get the closest to the children.

We would appreciate seeing the upgrading of licensed day care homes to the standards of Day Care Centers. Some licensed homes are of deplorable stature and nothing more than a baby-sitter drop off. A licensed day care home is a service provided for parents who must work and have children younger than what will be accepted by a center. Some sort of training should be a "MUST" for those working in a licensed home and some sort of approving the capabilities after exam, etc. is needed.

When one thinks of care for their children one wants the best available. To know that no matter what your finances are you will have a qualified person. Remember every parent has to try to be a child care specialist.

I am very interested in seeing your associate degree program succeed. With the growth of day-care and part-day or kindergarden it becomes more and more necessary to have people who are qualified to offer more than just custodial care for young children. I like your emphasis on the normal child and the practical aspects.

Rather than being given an examination the candidate could be observed on the job by the accrediation officer plus the supervisor or practitioner. (sic)

A community education program is needed on the needs of children to assure quality care.

I believe the head of each day care for children of any age should be required to have a physical fitness examination periodically. I think no one should be allowed a license without at least having met the requirements of one of the four (CCS) occupational levels mentioned above.

I'm not sure just how we can use this program. If we hired these specialists the children who attend center could not afford to come.

I think that all people who care for other children than their own should at least be licensed and have house and play area inspected for dirt, safety, features and fire hazards. I think a correspondence course of some sort would be worthwhile -- however should be offered by the state either free or at a minimal fee.

Believe probation period is an advantage -- I'd hate to see only an examination be the answer to certification.

Program should provide experience. As important as training is, I believe actual performance should be given equal consideration.

I feel these people would not have continued working in CDFL unless they were particularly interested in this field -- so I feel interview would be quite sufficient. Also observe the people in action.

Need to have the desire and ability to learn more about the development of children.

A person who chooses to stay at this (the lower CCS?) level over several years should have some kind of recognition.

We will be observing whether or not the formal training, natural ability to work with children or a combination will make the best day care center staff members. The ones we hire without formal education will be carefully screened by our director, myself, and approved by our committee.

I would like information on how I can take courses on child development and child care. Are these available by mail or night classes? Where?

I do not think it necessary that the individual need be certified or registered, but I do think the nursery school should meet some kind of recommendations or qualifications for certification or registration. Our salaries are based on number of years experience in nursery school field rather than formal qualifications or educational level.

I am much impressed with the need for training for anyone interested in working for and with children. The child care career ladder would be a good step forward.

I think the private home licensed for "day care" should be protected by some kind of legislation and also could be more thoroughly examined. Not from the standard of "rooms and space" but rather the safety of the child as -- poisons under sink in bathroom in reach of small children; it takes ability of a child care mother to "cope" with these problems.

I have read mixed feeling about "book" education -- (which cannot provide for) the loving and caring of pre-school children. Most of the times they need love, assurance, taught manners, and social behaviors in order to enter the public school system with no real mental or physical "blocks". Leaving their minds open for new fresh experiences. As one of my mothers said, she would rather have an experienced person than a "book" learned person. Thank God - for I could "mark" myself out of a job. My biggest concern is to just know what the results of all this pre-school education will do in another 15 years.

I worked for a while where even the director had no training. No lesson should ever be given to anyone who has not been through such training -- which training is proven and investigated, not given on say so of individuals involved. The children suffer too much from such a situation -- not to mention the fact that it tears apart those who are in the program and know better.

My husband and I are licensed to run a day care home. We do not have a day care center as such but basically provide babysitting for working parents. We are licensed for eight which includes our own three.

I care for these children by myself. I feel that they need a "mother image" to identify with, especially during the early years. I do not stress education, although they enjoy watching educational TV programs. I believe that children need the security of being with someone who cares about their welfare and that education is highly overrated. I try to keep the children in the same type environment as they would have in their own homes.

I am a high school graduate and worked as a receptionist in a doctor's office one year and have three children. I feel I am qualified to care for children as I have been state licensed for four years. I take care of 3 or 4 pre-schoolers in a family situation so we eat, pray, plan and learn as a normal family.

I feel you can have good, qualified assistants and associates if you train them well in your own school -- if you are qualified to do so and take the time to do it -- but many places don't. It would be wonderful to have all assistants have a certificate but where and how would they manage to get trained? If then, could you also afford to pay them after you get them trained? Unless required by law many places will always hire cheap, untrained, "slave labor" type people as assistants. Remember too, we have to keep our fees down.

We believe in a training program of this type due to the fact that we have people who have years of work-training and work-shops that would give them on-the-job training which would be the equivalent to courses offered. We should be able to give course credit for equivalency of knowledge and experience. We need courses geared to pre-school education or early childhood education.

I used to be Private Secretary for Health Organization and mothers brought their handicapped children for me to watch. I was almost unprepared to take care of difficult cases because of lack of training. Also there should be schools for mothers who have handicapped kids, to show them how or what methods to train these kinds of problem kids. No one ever realizes that it is a harder adjustment in society for mothers to handle their own kids.

I have yet to see a state sponsored certification or registration program that was worth it's weight in salt. Most, if not all, are so pre-occupied with degrees, courses, programs, that they invariably ignore the person sitting in front of them.

This question is debatable. I don't think we should be refused employment because one is not registered.

It is an important question and maybe certification would be the answer. The one who has spent a lot or MOST of time and interest in becoming the best CCS should not be overlooked in any way; lack of formal education should not preclude certification.

There are some people who can qualify fine for the job.

I want the best for my day center. Where can I get funded for my day center at the 4-C or where also can I go to school for this 2 years training on the job with pay?

I believe that a person who wishes to work with children in any of the child care services in our communities should be qualified. To understand children, (you must know) their needs, care, education, safety and child-relationship in order to help their growth and development.

One important factor is that you must have love for children, understanding and knowledge. Also the mother of the children should be interviewed for ideas and selections on child care -- especially mothers from low income areas.

PART IV comments continued

Since the Spanish speaking communities are growing, we would suggest a greater concern for bilingual education and adequate training of teachers with true understanding of cultural differences and language problems.

The electives should be the persons own choice: in that way you know more about your interests and qualifications better than anyone else. So, if you think you can do better in the singing field, teach others how to sing. If it's craft designing, teach others develop their creative ability. If it's food, share your ideas such as cleanliness, recipes, etc.

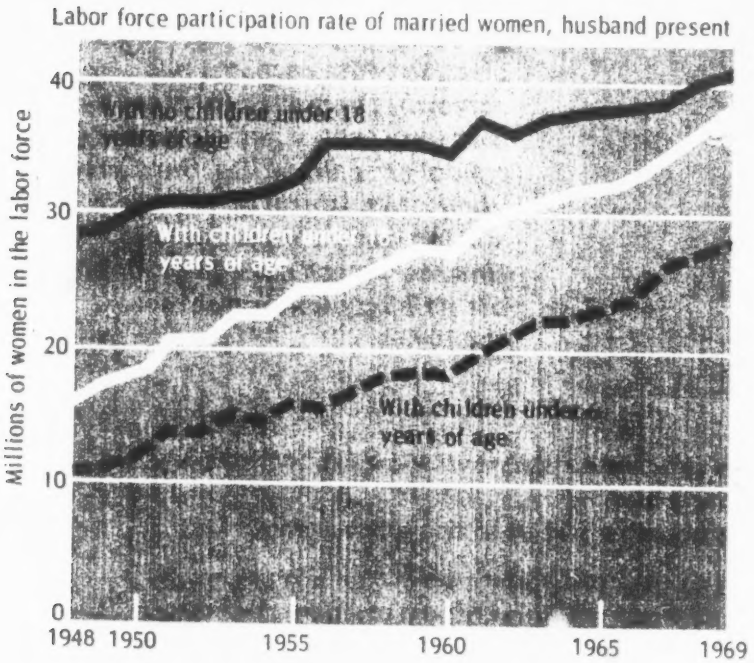
After the courses are completed as follows -- a student will be well qualified to deal with any child. (sic)

Only students who have had the course would be able to qualify for the position and be able to pass the test. (sic)

The needs of children for quality care. (sic)

My purpose of certifying the State Board type and because you get most of your material also -- most of the teachers have dealt with the state board type. (sic)

The increasing number of working women underscores the need for day care, continuing training and part-time employment



Labor force participation of married women with children has increased sharply — even for those with very young children.

The contributions women can make can be expanded with greater opportunity in the professions:

- Only about 7% of the physicians in the United States are women.
- Only about 3% of the lawyers are women — the same percentage as 15 years ago.

Fuller utilization of the skills and talents of women often requires

- Suitable child care arrangements for working mothers.
- New ways to retrain or update skills of women reentering the labor market.
- Increased part-time opportunities for women who wish to combine marriage, child-raising and work.

SOURCE: U. S. Manpower in the 1970's, Opportunity & Challenge
United States Departme t of Labor, 1970

APPENDIX V

Summary of Survey of the
Child Care Needs of Working Mothers
Tippecanoe County Community Coordinated Child Care Program

During April and May 1972, sixteen private employers in the Greater Lafayette area, including industries, insurance companies, hospitals and Purdue University cooperated in a survey of child care needs of working mothers conducted by the Tippecanoe County 4-C Program.

The survey was completed by 663 working mothers with children under 14 years of age. The questions focused on current child-care practices, personal child-care needs and what the working mother preferred in an ideal child-care plan. In addition, the survey requested information regarding working hours, family income, age of children, and residence, in terms of elementary school district.

The results of the survey are summarized below:

1. The survey was completed by 663 women with children under 14 years of age. Of these, 32% had children under 3 years of age, 27% had children from 3 to 5 years, and 41% had children from 6 to 14 years old. About 56% of the respondants had one child under age 14, about 26% had two children, and only 15% had 3 or more children under age 14.

2. The mothers were asked to indicate which age group they personally had the greatest need for good child-care. Thirty-five percent of the mothers responded that they had the greatest need for infant care (birth to 3 years), twenty-five percent indicated greatest need for preschoolers (age 3 to 5), and thirty-one percent responded that they had the greatest need for before and after school care. Of course, some of these mothers have a child in more than one of these age groups, but if they had a child under 3, it was generally the case that this was the child they had the greatest need of good child-care.

3. The mothers were asked in an open-ended question, "If you had your choice of an ideal child-care plan, what would it be?" Of the women completing the survey, 21% preferred a day care center, often with special provisions, as their ideal child-care plan. Eleven percent preferred a reliable woman to come into their home to provide child-care, and 9% preferred care in a babysitter's home.

4. When asked about their present child-care arrangement, only 5% checked that their child was cared for at a group care facility such as a day care center. About 42% of the children of working mothers are presently cared for in their own homes (8% by self, 24% by their father or older brothers or sisters, and 10% by another relative or a babysitter). Half of the children of working mothers are cared for in someone else's home, either relatives (11%), babysitter's home (36%) or a licensed day care home (3%).

5. Of the women responding to the survey, 19% were heads of household. Of the women who were heads of household, 24% had a family income of under $4,000 and 44% had a family income of $4,000 to 7,000. Of women who worked to supplement a husband's earnings, 52% had a family income of $10,000 or higher and 23% had a family income of $7,000 to 10,000. These figures point up the difference in level of prosperity which exists between working mothers who are heads of households and working mothers who have husbands.

6. Working mothers with children under 3 years of age are more likely to have their child cared for in a babysitter's home (54%) than are mothers with preschool (39%) or school-age children (25%). Mothers with preschool children are more likely to have their child cared for at a day care center (13%), than are mothers of children under 3 (1%) or mothers of school-age children (3%). School-age children are more likely to care for themselves (14%), be cared for by older siblings (20%) or in a babysitter's home (25%).

7. However, 27% of the mothers who say care for infants is their greatest need would prefer care in a special day care center, while 12% would prefer care in their own home and 13% would prefer care in a babysitter's home. Of the mothers who say they have the greatest need for care for preschoolers, 28% would prefer care in a day care center and 11% would prefer care in a babysitter's home. Mothers of school-age children would prefer someone to come to their home (13%) or special after-school activity programs (7%).

8. A larger percentage of working women with family incomes under $4,000 would prefer care for their children in a day care center (32%) than would respondants in general (21%). A larger percentage (14%) of working women with family incomes over $10,000, than the other respondants (10%) would prefer to have a person come into their homes to do child care. This probably reflects something about the cost of various types of available child-care, as well as basic attitudes toward type of care.

9. A larger percentage of working mothers with children in the West Lafayette schools (36%), would prefer care in a day care center as an ideal child-care plan than would women from Lafayette Districts (28%), Tippecanoe County Corp. Districts (25%), or other districts (12%).

10. We can get an indication of the satisfaction of the women with their current child-care arrangements by comparing their current arrangements with whay they say is their preferred plan. Of the women in this survey who are currently using child-care centers, a majority (64%), stated that this was their ideal child-care plan. In contrast, of the women who gave care in a babysitter's home as their current child-care arrangement, only 17% listed this type of care as their ideal child-care arrangement.

APPENDIX V (Continued)
Representative Comments from Child-Care Survey

"I would like to see a child care center affiliated with where I work, and be able to eat lunch with my children during the day. I think the center should be supervised by trained personnel but have mothers as aids to work with the children."

"I would say the ideal child-care plan would be one set up as a day care center, with experienced personnel that could handle both preschoolers and older children after school hours until the mother finished work."

"There is a need for day care centers that care for infants as well as older children. It seems most care for only children age 3 or over. This makes it difficult for mothers with more than one child -- perhaps having to take the children to two different places."

"After the age of three, I prefer a good cay care center where the child could play with others, but still have individual care and attention. I would be willing to help (outside of working hours) with the center in order to receive better quality. Cost is a big consideration in any child-care arrangement, of course, but the child is the primary concern. Before the age of 2 or 3, however, I feel that individual attention is needed in a home-type situation."

"My choice of an ideal child-care plan would be a centrally located, reliable day care center for infants. It could be set up similar to a nursery. There should be as many women to watch the infants as necessary."

"I prefer someone to come into my home to take care of my son. I think a child is happier in his own home."

"I really don't think there is an ideal child-care plan other than the Child's own mother. But, since this is sometimes impossible, I believe that the care should be as close to true home life as possible."

"My opinion would be at least the mother or father should be home when the other is gone."

"I would like to see licensed and qualified care for school-age children before and after school to fill in the hours for full-time working mothers. This should be a time for supervised recreation, creative activities, or just a relaxation period. It would be ideal for this to be in homes located close to the schools or perhaps in the schools."

"I am satisfied with taking my child to someone else's home. She is a licensed sitter and I could not get a better deal money-wise than what I have now."

"Day care should be licensed and in all areas of Lafayette. The people running licensed babysitting should be checked out closer and should have the health department inspect their homes at regular intervals."

"The number of children in a babysitter's home should be limited, especially when there are very many under 1 year of age. All home care should be licensed by the state. Child care fees should be tax deductable."

"I would like for my child to stay in a home with no more than 4 or 5 other children of various ages."

"I prefer a licensed day care home. This has worked great for my children and me."